

FOX, MICHAEL  
GUEST #: 16303  
9/19/2002  
JOHN C. KAGAN, M.D.  
OPERATIVE REPORT  
PAGE 2

Ligament and the posterior cruciate ligament is deficient. The anterior cruciate ligament is attenuated but functions. In the lateral compartment of the knee there is a tear of the lateral meniscus posterior horn and posterolateral corner. With biting instruments and a motorized shaver a partial lateral meniscectomy is done. The articular surface of the lateral femoral condyle and the lateral tibial plateau show grade II chondromalacia change. The posterolateral recess was visualized and there are no other abnormalities there. A synovitis is present in the suprapatellar pouch which is debrided with the motorized shaver and a large loose body is removed from the intercondylar notch. The skin incisions are closed with Steri-Strips and a bulky dressing is applied. The patient is sent to recovery in satisfactory condition.

JCK:JST  
D: 9/19/2002  
T: 9/19/2002

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JOHN C. KAGAN, M.D.

Patient FOX, MICHAEL

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9/30/02

A postop visit carried out today, documented to the chart.

His portals are clean and dry, a minimal amount of swelling. We've discussed with him the findings arthroscopically. The likelihood of knee replacement at some point. He needs to be touch-down weight bearing because of the microfracture techniques that were done, ice it frequently, just range of motion exercises, and we'll see him back in four weeks and x-ray the knee. He'll be off work until then.

John C. Kagan, M.D.

JCK/t/ph - JK

cc: Worker's Compensation

JOHN C. KAGAN, M.D.  
MICHAEL M. JUCAN, D.O.  
PEDRO E. MONSERRATE, M.D.  
PETER J. CURCIONE, D.O.  
ALLEN C. TAFEL, M.D.

PATIENT

Michael FoxPOST OP CARE

DATE:

9/30/12

DATE OF SURGERY:

9/19/12

SURGERY:

LT KS C Arthroplasty, Defect: Med. F. C. & M.T.

WOUND:

C/OPlm.

NEUROVASCULAR STATUS:

NV1

X-RAYS:

B

RX'S:

WORK STATUS:

off WORK until 4 wk f/up

PHYSICAL THERAPY:

Self-

PLAN:

4 wks— CRUISED TOWSIcExercises(Signature)POST OP CARE

DATE:

DATE OF SURGERY:

SURGERY:

WOUND:

NEUROVASCULAR STATUS:

X-RAYS:

RX'S:

WORK STATUS:

PHYSICAL THERAPY:

PLAN:

John C. Kagan, M.D.

Michael M. Jugan, D.O.

2745 Swamp Cabbage Court • Fort Myers, FL • 33901 • (813) 936-6778

Patient FOX, MICHAEL

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OFFICE  
NOTES

12/23/02

Established patient expanded problem focused H&amp;P documented in our chart 12/23/02.

CHIEF COMPLAINT: Left knee pain, follow up.

**HISTORY OF PRESENTING ILLNESS:** Mike is a delightful 43 who has had an injury at work which was an aggravation of an underlying preexistent degenerative condition in his left knee along with a new medial meniscus tear. He continues to be at work light duty, but has difficulty putting full weight on the leg. This was obviously some problem in the knee prior to this injury, but since the injury he has substantially increased in the terms of the symptoms. Mild to moderate pain, can be severe. It's better with rest and elevation. It recurs. He has a sharp, throbbing, aching that's intermittent. Exercise makes it worse. He did undergo arthroscopic surgery with a micro fracture technique of the medial femoral condyle, medial tibial plateau, and a partial medial meniscectomy and lateral meniscectomy.

X-rays obtained in our office today, Rosenberg film of both knees, lateral and sunrise view of the left knee, read as follows: Three views of the left knee demonstrates spurring in the intercondylar eminence, there's scoring of the lateral margin of the femur, there's minimal spurring of the patellofemoral joint.

Clinically he has a markedly antalgic gait on the left. He has slight hyperextension deformity on the left due to the posterior cruciate ligament laxity. He has laxity of the medial collateral ligament at 1+ to grade 2. He has moderate medial knee pain and pain with flexion/rotation tests. Our findings are consistent with a moderately degenerative left knee. Old tear of the posterior cruciate ligament. Subluxation and hyperextension deformity.

Options of treatment are discussed. He's absolutely miserable with the knee. We are going to go ahead and place him on anti-inflammatory Motrin 800mg, one twice a day with meals. He will check back with us in six weeks. Sedentary work only. He should not do any squatting, deep knee bending or climbing. At some point, with the amount of damage which is present in his knee, which was aggravated and made worse following this work related injury, he will need to consider reconstructive surgery or total knee replacement. We will try to put that off as long as possible, but given the patient's clinical findings this may be something which is needed sooner rather than later. Recheck in six weeks.

John C. Kagan, M.D.

JCK/t

cc: w/c

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Pedro E. Monserrate, MD  
Peter J. Curcione, DO  
Allen C. Tafel, MD  
Edward T. Humbert, DO



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Edward T. Humbert, D.O. • Allen C. Tafel, M.D.**

**January 6, 2003**

**Diane Smith, R.N.  
P.O. Box 6550  
Maitland, Florida 32794-6550**

**Re: Michael Fox**

**Dear Diane:**

As you know, we have been following Michael Fox for injuries sustained in his work-related accident. He underwent arthroscopic surgery on 9/19/02, at which time we found advanced arthritis of the medial compartment along with advanced arthritis of the patellofemoral joint. He also had a tear of the medial meniscus and underwent the microfracture technique for the medial femoral condyle and medial tibial plateau. He also had a tear of the lateral meniscus and underwent partial lateral meniscectomy. He was to be protected WB x 6 weeks and light duty x 4 weeks, no lifting, squatting, deep knee bending or climbing. We planned an 8-week recheck.

At our 8-week recheck on 12/23/02, he had pain in the left knee with a hyperextension deformity, laxity of the MCL, and moderate findings of inflammation. We recommended that we cut his work back to sedentary duty. In the intervening time, a motor vehicle accident occurred. I am not aware of any affect that this had on his knee.

Based upon my findings, it appears that his problems in his knee are related to an underlying post-traumatic degenerative condition that was aggravated by his work injury. It is likely that he will require reconstructive surgery or total knee replacement to address this ongoing arthritic problem in his left knee.

If you desire further information, please do not hesitate to ask.

Sincerely,

  
**John C. Kagan, M.D.  
JCK/kn**

**cc: Attorney Jerry Cico**

*Board Certified*

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Patient FOX, MICHAEL

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2/3/03

An established patient detailed office visit carried out today, 2/3/03, documented in the chart.

CHIEF COMPLAINT: I'm following up on my knee.

He had a work injury and then subsequent surgery on the left knee on 9/19/02 with medial compartment arthritis, patellofemoral arthritis, tear of the medial meniscus, and a micro fracture technique was done on the medial femoral condyle, medial tibial plateau. He's been doing sedentary work only, and this will be a permanent restriction. We gave him Motrin to take last time, he says that definitely has helped, especially when easing the sharp twinges and pain that he was getting in the knee. It still aches, he gets an occasional sharp pain, it's pretty constant when he's up and active on it, but it definitely was better with the Motrin.

He reports that he had some blood in his stool, but it wasn't dark black, it was more red, which would tend to mean that it was a rectal trouble rather than actually a reaction to the Motrin in the upper GI tract. He cut back to one Motrin a day, and what I would do at this point, since there is a question as to whether he had some kind of GI problem from the Motrin. He doesn't really have any heartburn just the few episodes of blood rectally. Again, this is red and actually if he continues to have that problem he needs to go through his family doctor and get that checked out. No change in work status or impairment rating.

RECOMMENDATIONS: At this point we are going to have to hold on his Motrin, even though it is helping him. We can't be certain whether the blood that he has in the stool is coming from the use of Motrin. Usually you would think that would be a tarry kind of stool rather than red blood but it could be causing some distal irritation that might be contributing to that. I think that he needs a GI evaluation in that regard. We'll hold off on the Motrin or any other anti-inflammatories until we have word back from the gastroenterologist.

Now, in regards to his work status, he's been sedentary, I think that we can allow him to do about two hours of light duty work limiting squatting, kneeling, deep knee bending, and any climbing in that frame work of sedentary work. We'll recheck him in three months, he's not at maximum medical improvement.

John C. Kagan, M.D.

JCK/t - JK

cc: w/c

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Michael M. Jugan, DO  
Pedro E. Monserrate, MD  
Peter J. Curcione, DO  
Allen C. Tafel, MD  
Edward T. Humbert, DO

OFFICE NOTES

Patient FOX, MICHAEL

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4/28/03

This is an established patient expanded problem focused examination. The H&P is documented on today's chart, 4/28/03.

**CHIEF COMPLAINT:** Persistent left knee pain.

**HISTORY OF PRESENTING ILLNESS:** Mr. Fox returns to the office for reevaluation. He has been followed in this office for evaluation of left knee problems attributable to work related injuries. He's undergone arthroscopic decompression and debridement, as well as microfracture technique, but he is still having persistent pain and discomfort, swelling, instability of his knee.

Mr. Fox states that he has been approved by his carrier for a total knee replacement.

Mr. Fox also notes that when he was last seen he was having rectal bleeding we though attributable to his taking Motrin. He has since ceased all nonsteroidal anti-inflammatories, including aspirin; but, on further questioning, is still having bright red rectal bleeding. He was seen by a gastroenterologist, was scheduled to undergo a colonoscopy and further evaluations, but he did not followup with him. He has not followed with his family physician either in this issue, and he states he still has persistent rectal bleeding.

On physical exam, which is documented on the chart, the pertinent findings are referable to his left knee. He has marked patellofemoral crepitus, grimace is appreciated. He has crepitus with range of motion. He has medial and lateral joint line tenderness, more medial. There is some posterior instability appreciated, as well as some mild anterior instability. This is minimal.

**Radiographic data:** Plain films of the left knee, Rosenberg's updated from December, have demonstrated osteoarthritic degenerative changes of the left knee.

**IMPRESSION:** 1) Posttraumatic osteoarthritic degenerative disease of the left knee.  
2) Functioning posterior cruciate ligament of the left knee, compounding #1.

**RECOMMENDATIONS:** At this time, we've had a long discussion with patient in regards to his condition as well as further treatment. He presents to the office with a large amount of information regarding the "3-D knee" and requesting that be the prosthesis that we use.

(Continued)

John C. Kagan, MD  
Michael M. Jagan, DO  
Pedro E. Monserrate, MD  
Peter J. Curcione, DO  
Allen C. Tafel, MD

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Patient FOX, MICHAEL - 2

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4/28/03

We have had a long discussion in regards to this. This is a new implant, and it is a cementable implant. The majority of our implants used are cementless. Nonetheless, we'll review his data and information and contact him later this week and discuss this further with him. We did discuss with him the procedure of left total knee replacement including the procedure, the limitations of surgery, the benefits to improve function and range of motion, but have explained to him that he will still have limitations. He will probably not be able to climb ladders. He will not be able to dig ditches, etc, and that he will have some restrictions. Also, we have explained the risks of surgery such as death, paralysis, infection, anesthesia complication, neurovegetative state, as well as the possibility of infection of the implant, failure of the implant, revision, the possibility of deep vein thrombosis, pulmonary embolus requiring Coumadin postoperatively to prevent such.

In regards to his rectal bleeding difficulties, again we have strongly reiterated that he return to his family physician or the gastroenterologist and have this further evaluated. We have told him that rectal bleeding is a sign of problems, and since he is off all anti-inflammatories, that he still may have some ongoing difficulties that still need to be addressed.

We'll contact him later to further discuss with him his request for joint replacement and to make further recommendations with him.

John C. Kagan, M.D.  
JCK/t/ph - JP

*Continued . . . .*

John C. Kagan, MD  
Michael M. Jugan, DO  
Pedro E. Monserrate, MD  
Peter J. Curcione, DO  
Allen C. Tafel, MD

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Patient FOX, MICHAEL

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OFFICE  
NOTES

10/28/02

X-rays obtained today of the left knee, two views, read as follows: Two views of the left knee again demonstrate posterior subluxation of the tibia on the femur. Spurring of the intercondylar eminence.

Michael had a work related injury which included a tear of the medial meniscus. He underwent a micro fracture technique for chondral injury of the medial femoral condyle and medial tibial plateau, and he underwent a partial lateral meniscectomy. He is now six weeks out and we will allow him to start his weight bearing. He will increase partial weight bearing to full over the next two weeks. He will be allowed to return to work light duty in four weeks. This will be limited lifting, no squatting, no deep knee bending and no climbing. I'll check him back in eight weeks from today for reevaluation.

John C. Kagan, M.D.

JCK/t

cc: w/c

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1415 HOMESTEAD RD. N. ♦ LEHIGH ACRES, FL 33936 ♦ (941) 368-8277 TEL. ♦ (941) 368-8276 FAX

PATIENT

Michael Fox

POST OP CARE

W/C

DATE:

10/28/2

DATE OF SURGERY:

9/19/3

SURGERY:

Lt KS. (Micro tra. tech) defect. M.F.C. & Med. Tib. Pl

WOUND:

C/OPLM

NEUROVASCULAR STATUS:

NVI

X-RAYS:

2 VIEWS

RX'S:

Ø

WORK STATUS:

Currently off work, X 4 more weeks then Return

PHYSICAL THERAPY:

Selflight duty X 8

PLAN:

FLU8 wks.

POST OP CARE

DATE:

DATE OF SURGERY:

SURGERY:

WOUND:

NEUROVASCULAR STATUS:

X-RAYS:

RX'S:

WORK STATUS:

PHYSICAL THERAPY:

PLAN:

John C. Kagan, M.D.

Michael M. Jugan, D.O.

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Patient FOX, MICHAEL

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4/28/03 - ADDENDUM: So today the x-rays of the left knee, two views, read as follows: Marked deformity of the left knee consistent with posttraumatic osteoarthritis. At this point we have suggested total knee replacement on the left. This would be done in the hospital under a general anesthesia with the attendant risks of blood clot, infection, nerve damage, stiffness, failure of the operation, redo surgery, death, paralysis and imponderables. The benefits hopefully decrease discomfort. He understands the risks involved and we'll be happy to take care of this.

John C. Kagan, M.D.

JCK/t

cc: w/c

John C. Kagan, MD  
Michael M. Jugan, DO  
Pedro E. Monserrate, MD  
Peter J. Curcione, DO  
Allen C. Tafel, MD

Patient FOX, MIKE

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6/01/03

I spoke with Mike on the phone, as I had received a note from Diane, the adjustor, regarding his scheduled surgery. Mike left a lot of information on the 3D knee here with us, which I gave to my office manager to return.

I spoke with Mike on the phone and he really wants to have the 3D knee done. He talked to Andy Hodge in West Palm Beach but apparently CNA Insurance does not have Dr. Hodge on the panel. If Dr. Hodge cannot do the 3D knee, he will need to find someone locally to do it. I do not feel comfortable doing it, as I do not typically cement in these.

If Dr. Hodge is not available, I would suggest that CNA setup a 2<sup>nd</sup> opinion here, maybe with Dr. Markovich, Dr. Springer or Dr. Fenning, or another qualified orthopedic surgeon for the joint replacement. As I said, with this particular gentleman, I really do not feel comfortable cementing in a total knee replacement.

John C. Kagan, M.D.  
JCK/kn

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Patient FOX, MICHAEL

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6/23/03

Work related evaluation dated 6/23/03.

Michael, with left knee pain following a work related 8/3/02 accident on top of a preexistent osteoarthritic left knee, has elected to forego the total knee replacement scenario at this point. He is able to do light duty work and has been back to work since January 10<sup>th</sup> with his employer. He plans to continue working in that capacity and try to upgrade a little if tolerated. In fact, he says that he enjoys his work. He does not feel with the risks that are present with a total knee replacement that he wants to undergo that at this time.

Accordingly, I will place him at maximum medical improvement with a 9% rateable whole man impairment. He may be released to permanent light duty work with a limitations in climbing, squatting, and deep knee bending.

A recheck will be planned via this office as needed for flare up.

John C. Kagan, M.D.

JCK/t

w/c

OFFICE  
NOTES

John C. Kagan, MD  
Michael M. Jugan, DO  
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**Athletic Orthopedics and Reconstructive Center**

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Pedro E. Monserrate, M.D. • Peter J. Curcione, D.O.  
Edward T. Humbert, D.O. • Allen C. Tafel, M.D.**

**July 21, 2003**

**Michael Fox  
3726 Whidbey Way  
Naples, Florida 34119**

**Dear Michael:**

**I received a message that your attorney was wondering if your problems in the right knee would be related to your left knee work accident.**

**At this point in time, I would not relate any problems in your right knee to the problems in your left knee. I am frequently asked whether a problem in the left knee can cause significant problems in the right knee but, over a reasonably short period of time, the answer to that question is no.**

**I hope all is well for you.**

**Sincerely,**

**John C. Kagan, M.D.  
JCK/kn**

*Board Certified*

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*Exhibit 4-A*

**ESTABLISHED PATIENT EXPANDED PROBLEM FOCUSED HISTORY AND PHYSICAL**

Patient Name: Michael Fox  
Date: 04/01/04

**CHIEF COMPLAINT:** Left knee pain.

**HISTORY:** This is a very pleasant 45-year-old gentleman whom we have been following for ongoing left knee pain subsequent to a work-related injury that he sustained on August 3, 2002. He has undergone arthroscopic decompression and debridement, as well as a microfracture technique but continues to have persistent pain, discomfort, swelling, and instability in the knee. He describes a discomfort on a daily basis and it is constant pain with an occasional sharp pain depending on activity. He notes the pain is progressively becoming worse. He describes a moderate-to-severe pain with a recurring, sharp, throbbing, aching, and constant pain that increases with long-term standing. No associated signs or symptoms or modifying factors.

His past medical history, family medical history, social history, and review of systems are outlined and documented in the chart.

**PHYSICAL EXAMINATION:** Physical examination is performed and documented in the chart. His vital signs are stable. Specific musculoskeletal findings include patellar crepitance to the left knee, and positive grimace test. He does have some crepitance with range of motion with medial and lateral joint line tenderness, more in the medial. There is some mild posterior instability noted as well as mild anterior instability as well.

X-rays obtained today. AP and lateral views of the left knee read as follows. Two views of the left knee demonstrate osteoarthritic degenerative changes in the knee to include intercondylar spurring, spurring of the medial compartment, as well as spurring of the superior and inferior pole of the patella.

**IMPRESSION:** Osteoarthritis of the left knee.

**RECOMMENDATIONS:** At this point, we did again discuss that he may be looking reconstructive surgery in the future. He would prefer to hold off on that for now. At this point, there will be no change in his work status or impairment rating. We will see him back on an as needed basis.

John C. Kagan, M.D. JB

Jenn1183

W/c ✓





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Pedro E. Monserrate, M.D. • Peter J. Curcione, D.O.  
Kenneth J. Galang, M.D.

**WORK STATUS REPORT**

Patient Name: Michael Fox Date: 4-11-06

Diagnosis: \_\_\_\_\_

Patient work level:

☐ Regular Duty

☐ Off Work

☒ Sedentary Duty. Lifting 10 lbs. Maximum: occasionally carrying such articles as dockets, ledgers and small tools. Work essentially involves sitting, and is considered sedentary if only a small amount of walking and standing is necessary to carry out duties.

☐ Light Duty. Lifting 20 lbs. Maximum: frequent lifting or carrying objects up to 10 lbs. Work is classified light if it requires walking or standing to a significant degree (regardless of weight lifted) or involves sitting most of the time with a degree of pushing or pulling or arm or leg controls.

☐ Light Medium Duty. Lifting 30 lbs. Maximum: frequent lifting or carrying objects weighing up to 25 lbs.

☐ Medium Duty. Lifting 50 lbs. Maximum: frequent lifting or carrying of objects weighing up to 25 lbs.

☐ Light Heavy Duty. Lifting 75 lbs. Maximum: frequent lifting or carrying of objects weighing up to 40 lbs.

☐ Heavy Duty. Lifting 100 lbs. Maximum: frequent lifting or carrying of objects weighing up to 50 lbs.

His/Her special instructions: Station on walk down  
2 hrs / day

Physician Signature: [Signature] Date: 4/11/06

Board Certified

Patient Name: FOX, MICHAEL  
Patient Number: 20029

D.O.S: 05/20/2004

**HISTORY OF PRESENT ILLNESS:** The patient is a 45-year-old right-handed white male who comes to the office today through Workmen's Comp for evaluation of possible total knee replacement. The patient suffered 2 twisting injuries to his left knee on 08/02/2002 and 08/08/2002 while working as a commercial plumber down in Fort Myers. He was subsequently seen by Dr. John Kagan. He underwent an arthroscopy of his knee on 09/19/2002 where he had debridement and microfracture. Unfortunately, he did not get any significant improvement thereafter. He has been followed by Dr. Kagan up until this past April. He actually brought some x-rays of his knees from April. In review of the notes from Dr. Kagan's office, there was discussion of total knee replacements. The patient himself has done a significant amount of Internet research regarding the 3D knee and other options, and he wants to discuss the knee replacement options. He was placed at MMI on 06/23/2003. Unfortunately, he was laid off from his present work and has not been working since 10/03/2003. In terms of symptoms, he is having chronic pain in the left knee. He says it is painful enough that now he is starting to have pain on the right knee because it is bearing the brunt of his activities. No swelling, no deformity. He says he can walk 1-2 miles, but then has severe pain thereafter. He has not noticed any loss of motion, but it is painful mostly medially. He has had no locking. He has had chronic clicking and popping. Not using any cranes, crutches, or braces at this point in time. His treatments have not included cortisone injections based on questioning him. He has not had any viscoelastic supplementation. He has had no physical therapy. The only medication he is using is Motrin.

**PMH:** Medical Illnesses: None.

**SURGERIES:** Pneumothorax secondary to motor vehicle accident and rib fractures dating back to 1976. He had a splenectomy secondary to the same motor vehicle accident. He has had a left orchiectomy in 1984 secondary to testicular cancer. He has had arthroscopy of the left knee. He has had 4 hernias. He had bilateral inguinal hernias as a child. Then, he had a repeat inguinal hernia on the left side and then on the right side.

**ALLERGIES:** None known.

**MEDICATIONS:** See above.

**SOCIAL HX:** No tobacco. Rare alcohol. Caffeine may be once a week or month. Single, never married.

**FAMILY HX:** Mother alive at age 81, has COPD. Father deceased at age 57, MI. He has got a brother alive and well.

**REVIEW OF SYSTEMS:** Patient denies SOB, angina, dyspnea, chronic cephalgia, renal, hepatic, hypertensive, hematologic, GI or GU disorders.

**SKIN:** No prior history of rashes or eruptions.

**HEAD:** No injury or headache.

**EYES:** No vision defects; no blurred vision, light flashes, etc.

**EARS:** No history of tinnitus, earaches, infections.

**NOSE/THROAT:** Normal gums, teeth; no bleeding from gums.

**NECK:** No disclosures of lumps, pains, spasms, or stiffness.

**BREASTS:** Deferred.

**RESPIRATORY:** No asthma, no cough, no sputum disorders, no wheezes, no history of TB or pneumonia.

**CARDIAC:** No history of SOB or prior heart problems.

**GI/GU:** No history of GI problems, GERD, or ulcerations; no urinary tract problems disclosed.

**GENITAL:** Deferred.

**PERIPHERAL VASCULAR:** No prior history of claudication, thrombophlebitis, or thrombosis lower extremities.

**NEUROLOGIC:** No prior history of CVA or TIAs; no incidents of fainting spells, paralysis, tremors, or numbness.

ENDOCRINE: Euthyroid; no prior history of diabetes or polyuria.  
PSYCHIATRIC: Normal affect and mode history.

**PHYSICAL EXAMINATION:**

GENERAL: A 6' white male weighing 270.

VITALS: BP 134/83, pulse 67 and regular.

HEENT: Normocephalic, atraumatic. Nose and throat clear.

NECK: Supple. No JVD. No lymphadenopathy or bruits.

CHEST: Clear to P&A.

HEART: Regular rate and rhythm. Normal S1-S2. No murmurs. No S3 or S4.

ABDOMEN: Protuberant, nontender. Bowels sounds positive.

**EXTREMITIES:**

UPPER: No cyanosis, clubbing, or edema.

LOWER: No cyanosis, clubbing, or edema.

LEFT KNEE: He had a well-healed scar over the midline aspect of the left knee.

RIGHT KNEE: There was a scar curvilinear just below the tibial tubercle. No evidence of any cyanosis, clubbing, or edema.

GAIT: There was no gross limp or list.

**JOINTS:**

Range of Motion: Examination of the joints in the lower extremities, in the supine position, full ROM of all the joints on right lower extremity. On the left side, he had full range of motion of all the joints as well. With specific reference to the knee, on palpation, there was discomfort along the medial joint line. There was patellofemoral crepitus. No pain along the lateral joint line. He had full extension and full flexion. Negative anterior drawer. Positive gapping along the medial joint line with valgus stressing of a little less than 1+. No gapping along the lateral joint line with varus stressing. Negative Lachman.  
NEUROLOGIC: Sensory and motor exam grossly intact.

**X-RAYS:**

LEFT KNEE: From 04/01/2004, AP and lateral views shows that, surprisingly, his joint spaces are maintained slightly narrowed on the medial side, but moderate osteophytic formation along the medial joint line. On the lateral view, there is obvious patellofemoral arthritic change. There is moderate amount of anterior osteophytic formation along the tibial plateau as well as the interchondral notch posteriorly.

**IMPRESSION:** Traumatic degenerative arthritis of the left knee.

**RECOMMENDATIONS:** We had a long discussion about the surgical options. There is no doubt that with his chronic pain that total knee replacement is an option, but he has not really had a true course of any conservative treatments based on what we have talked about today. Certainly, he has not had any cortisone injections. He has never had a trial of the viscoelastic supplementation. I have discussed this with him, because he is 45 years old and I emphasized to him that doing a total knee replacement at this age is potentially \_\_\_\_\_ with a complication that he may need 1 or 2 revisions in his lifetime and, that after each subsequent revision, the results may not be as good and he may become more crippled as he gets older. It would be best to try to forestall the surgery if we can get him comfortable with any other conservative modalities. I then went on to discuss the surgical options. We talked about knee replacements. We talked about the different types of knees out there. We talked about the 3D, which he was very interested in and had a lot of information on, but I recommended that we may consider not doing this at his age only because this is a fully cemented knee at this point in time it is still not yet set up for cementless application. I did discuss with him the rotating platform, i.e., the New Jersey Knee, which has over 25 years of clinical history, and I told this is the knee that I particularly use in young individuals. I also emphasized that orthopedists are trained on different types of joint replacements and that is why there was a different discussion when he spoke to Dr. Kagan who uses a different type of knee system. I told him the ultimate outcome really depends on the

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surgeon and technique. At this point, though, I sense that he may have a preconceived idea of exactly what he is going to expect out of the knee replacement. I told him that he has to go through this with a realistic idea of that not all patients can go out and have the total knee replacement and do everything that they want to do. They are limitations. I also emphasized that less than 1% of knee replacement patients can sometimes be left with some chronic residual unexplained pain or discomfort, less than 1% can have some chronic residual intermittent swelling of the knees that is sometimes unexplained as well, that he has to go into understanding that there are potential problems such as these. In the interim, I will give him some information on the viscoelastic. I want him to think a little bit more about doing the knee replacement option at this point in time. If he is agreeable, he probably should try to forestall it as long as he can up until the time comes that we know that we have tried the conservative options and they have completely failed, and then we can go ahead and proceed with the knee replacement option.

Walter K. Furman, M.D.  
WKF:srk

d: 05/20/2004

t: 05/21/2004

2750 Bahia Street, Suite 100  
Sarasota, FL 34239

Phone (941) 951-2663 Fax (941) 957-4437

Patient Name: FOX, MICHAEL  
Patient Number: 20029

D.O.S: 07/01/2004

**HISTORY:** The patient comes to the office today for reassessment of his Workmen's Comp left knee injury. Symptomatically, he is about the same. He is still having moderate amount of pain. He is having pain with flexion and pain with twisting. He has been trying to work on weight loss in preparation for total knee replacement. When last seen, we discussed different knee replacement options and he is leaning more toward doing the New Jersey Knee, which I think would be best for him at his age and his activity level. In the interim though, we have briefly talked about viscoelastic supplementation, I think this will be the best option to consider at this point in time, but we still have not gotten Workmen's Comp approval for this. We have to check with them, but in the interim, he has been having increasing pain in the right knee. Although, this was not the knee that was injured in the Workmen's Comp injury dating back several years ago. This has borne the blunt of his activities because he has been trying to walk favoring the left knee because of the pain. This certainly does make sense in terms of treating this as well. We have to get approval from Workmen's Comp to see if they would allow us to do a course of viscoelastic supplementation as well on the right after we do the left side.

**PHYSICAL EXAMINATION:****VITALS:** BP of 169/96, pulse 60 and regular.**LEFT KNEE:****Inspection:** No swelling.**Range of Motion:** He had full extension and flexion to about 100-105 degrees.**Palpation:** Significant patellofemoral crepitus. Moderate pain along the medial joint line. Crepitus along the medial joint line. No pain over the tibial tubercle, pes bursa, or popliteal fossa. No joint effusion. No increased warmth. Very slight laxity along the medial joint line with valgus stressing no more than 5 mm. Negative anterior drawer.**NEUROLOGIC:** Sensory and motor exam intact.**IMPRESSION:**

1. Traumatic degenerative arthritis of the left knee.
2. Right knee/leg pain.

**RECOMMENDATIONS:** Course of viscoelastic supplementation left knee, pending Workmen's Comp approval. Depending on how he does on the left side, we would consider viscoelastic supplementation on the right side if Workmen's Comp would cover this. In the interim, we discussed TKR. We will aim maybe toward the end of the year for doing the TKR pending results of viscoelastic supplementation. He did inform me that he does have attorney representation, and I emphasized to the patient that he may have to go through the attorney to get the approval for Workmen's Comp now for the additional subsequent treatments.

  
Walter K. Furman, M.D.  
WKF:js

d: 07/01/2004

t: 07/03/2004



Phone (941) 951-2663 Fax (941) 957-4437

Patient Name: FOX, MICHAEL  
Patient Number: 20029

D.O.S: 07/15/2004

**HISTORY:** The patient comes to the office today for reassessment of his Workmen's Comp left knee injury. Left knee is about the same, no complaints, but he is having increasing pain in the right knee. He mentioned this on last visit. Apparently he has been having pain in the right knee over the past year and half. He says that since he has been having the problems with the left knee that he feels that favoring the right knee has caused the increasing pain. Most of the pain is centered over the patellar area. Has not noticed any increased warmth or swelling. No loss of motion. No clicking. No locking. He has had some episodes of giving way. He points to the patellar area as the area of maximal discomfort. No specific injury that he is aware about, and he says he never had any prior history to the problem. He has had no treatment for the right knee over the past year and half. Certainly with the problem that he has been having on the left knee and the fact that he has been favoring the right side, this is certainly a source for his onset of problems.

**PHYSICAL EXAMINATION:****VITALS:** BP 130/74, pulse 79 and regular.**GAIT:** Grossly normal. No gross limp or list.**LEFT KNEE:****Inspection:** No swelling, erythema, or ecchymosis.**Palpation:** Pain along the medial joint line. Some discomfort laterally.**Range of Motion:** Full flexion and extension to 105 degrees.**RIGHT KNEE:****Inspection:** No swelling. No increased warmth.**Palpation:** No pain along the medial joint line. No pain in the popliteal fossa. Most of the pain was over the patellofemoral area, mild in nature. Obvious mild crepitus with flexion and extension, especially at the terminal extension of 20 degrees. Negative instability. Negative Lachman. Negative McMurray.**NEUROLOGIC:** Sensory and motor exam intact.**X-RAYS:****RIGHT KNEE:** AP erect, tunnel view, lateral, and skyline view did not show any evidence of any significant joint space narrowing. The only note was that on the skyline view, he had a very small 1 mm osteophyte emanating off the most medial aspect of the trochlear groove. The patellofemoral joint space was well maintained.**IMPRESSION:**

1. Traumatic arthritis of the left knee.
2. Patellofemoral arthritis of the right knee.

**RECOMMENDATIONS:** In terms of the right knee, we will just treat this symptomatically. We would get him onto an antiinflammatory medication. Other options would be changing the medication if it does not work, cortisone injection, and viscoelastic supplementation. I told the patient that he does not require any surgery on the right knee. In terms of the left knee, we will go ahead and start the series of Supartz injections today. We will finish this up within the next 5 weeks and see how he does. I will see him back in the office in a week for Supartz 2. We will start him on Celebrex 200 mg p.o. q.d. p.c. p.r.n. Use of and precautions given. Samples and prescription given today.

**PROCEDURE:** Under aseptic triple-prep technique, I have injected the left knee through an anterolateral portal injecting a 2 mL solution of Supartz solution without difficulty. Pressure was applied. Band-Aid was applied. The patient tolerated the procedure well.



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Walter K. Furman, M.D.  
WKF:jlc

d: 07/15/2004

t: 07/16/2004



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Sarasota, FL 34239

Phone (941) 951-2663 Fax (941) 957-4437

Patient Name: FOX, MICHAEL  
Patient Number: 20029

D.O.S: 07/22/2004

**HISTORY:** The patient comes to the office today for his second of the Supartz series injection into the left knee. No major changes since the first injection.

**PHYSICAL EXAMINATION:** PE of the left knee is unchanged.

**IMPRESSION:** DJD, traumatic arthritis of the left knee.

**PROCEDURE:** Under aseptic triple-prep technique, I have injected the left knee through an anteromedial portal injecting a 2 mL solution of Supartz solution without difficulty. Pressure was applied and Band-Aid was applied. The patient tolerated the procedure well.

**RECOMMENDATIONS:** Follow up in the office in a week for Supartz 3.



Walter K. Furman, M.D.  
WKF:sus

d: 07/22/2004

t: 07/23/2004

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2750 Bahia Street, Suite 100  
Sarasota, FL 34239

Phone (941) 951-2663 Fax (941) 957-4437

Patient Name: FOX, MICHAEL  
Patient Number: 20029

D.O.S: 07/29/2004


**HISTORY:** The patient comes to the office today for his third of the Supartz series injections. No complaints at this point in time. He is questioning me about my initial assessment of him dating back to 07/15/2004. He was questioning some areas specifically the left knee, about having clicking and popping in the knee. Although, he is complaining of clicking and popping and no specifically referenced crepitus, which I told him, is about the same. He has questioned recommendations about viscoelastic supplementation, and I explained to him again that that is what we are doing today with the Supartz series injections.

**PHYSICAL EXAMINATION:**  
**LEFT KNEE:** Unchanged.

**IMPRESSION:** DJD, traumatic arthritis of the left knee.

**PROCEDURE:** Under aseptic triple-prep technique, I have injected the left knee through an anterolateral portal injecting 2 mL of Supartz solution without difficulty. Pressure was applied and Band-Aid was applied. The patient tolerated the procedure well.

**PLAN:** Follow up in the office in a week for Supartz 4.

  
Walter K. Furman, M.D.  
WKF:jlc

d: 07/29/2004

t: 07/30/2004

## SARASOTA ORTHOPEDIC ASSOCIATES

2750 Bahia Street, Suite 100  
Sarasota, FL 34239

Phone (941) 951-2663 Fax (941) 957-4437

Patient Name: FOX, MICHAEL  
Patient Number: 20029

D.O.S: 08/04/2004


**HISTORY:** The patient is here for his 4th of the Supartz series injections in the left knee. Continues to feel that it is helping him. Again, he is complaining about the right knee pain. We did address this on my 07/01/2004 note. The impression was that it was probably being exacerbated by the left knee symptomatology. We are still waiting for definite Workmen's Comp approval for assessing the right knee further, for any type of treatment.

**PHYSICAL EXAMINATION:** Left knee, unchanged.

**IMPRESSION:** DJD of the left knee.

**PROCEDURE:** Under aseptic triple-prep technique, I have injected the left knee through an anterolateral portal injecting 2 mL of Supartz solution without difficulty. Pressure was applied and Band-Aid was applied. The patient tolerated the procedure well.

**PLAN:** Follow up in the office in a week for Supartz 5. We will review his x-rays at that point.

  
Walter K. Furman, M.D.  
WKF:pyd

d: 08/04/2004

t: 08/05/2004

SARASOTA ORTHOPEDIC ASSOCIATES  
2750 Bahia Street, Suite 100  
Sarasota, FL 34239

Phone (941) 951-2663 Fax (941) 957-4437

Patient Name: FOX, MICHAEL  
Patient Number: 20029

D.O.S: 08/11/2004

**HISTORY:** The patient to the office for the fifth and final of the Supartz series injections to the left knee. So far, he has made some good progress. He is still waiting to get some definitive approval to address his right knee pain.

**PHYSICAL EXAMINATION:**  
**LEFT KNEE:** Unchanged.

**IMPRESSION:** DJD, left knee.

**PROCEDURE:** Under aseptic triple-prep technique, I have injected the left knee through an anteromedial portal injecting 2 ml of Supartz solution without difficulty. Pressure was applied and Band-Aid was applied. The patient tolerated the procedure well.

**RECOMMENDATIONS:** Follow up in the office in 6 weeks. Give this at least a 4-6 week period to really kick in and work and see how he functions. Any other problems then we will discuss this on return visit.

  
Walter K. Furman, M.D.  
WKF:pyd

d: 08/11/2004

t: 08/12/2004

## SARASOTA ORTHOPEDIC ASSOCIATES

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Sarasota, FL 34239

Phone (941) 951-2663 Fax (941) 957-4437

Patient Name: FOX, MICHAEL  
Patient Number: 20029

D.O.S: 09/29/2004

**HISTORY:** The patient comes to the office today for reassessment of the left knee. He has gone through his previous series of Supartz injection and actually he is doing a little bit better. His activity level is still fairly low. He has not been back to work for approximately 1 year now. He has been using the Celebrex. This seems to be tiding him over well. He is requesting a new prescription. No other complaints.

**PHYSICAL EXAMINATION:**

**VITALS:** BP revealed the vital signs of 156/128 and pulse of 65. I need to recheck before discharge.

**GAIT:** No gross limp or list.

**LEFT KNEE:**

**Inspection:** No swelling, deformity, erythema, or ecchymosis.

**Palpation:** No increased warmth. No effusion about the knee.

**Range of Motion:** Full active extension. Flexion is about 110 degrees. Patellofemoral crepitus at the terminal extension at about last 20 degrees. Minimal discomfort along the joint lines at this point in time. CSM is intact.

**IMPRESSION:** Degenerative arthritis, left knee.

**RECOMMENDATION:** We had a long talk regarding subsequent treatment at this point in time. He was questioning about doing cortisone injection, which he has never had. I told him that based on his physical examination today and the fact that he is doing a little bit better after the Supartz series injection, I would certainly try to hold off on the cortisone injection for as long as possible. I emphasized that each time we do the cortisone injection the window of pain relief shrinks and becomes less and less effective. I would like to use it only if symptoms get worse, again in the hopes that we can prolong the need for the knee replacement as long as possible. In the interim, I will renew his Celebrex, which he will continue with. I will see him back in the office in 2 months. In terms of work status, since he has not been on the work for over a year and since this was already going on prior to my assumption of the care, specifically for the knee, we will just continue the same work status, i.e., no work at this point in time unless job retraining can be considered.



Walter K. Furman, M.D.  
WKF:vid

d: 09/30/2004

t: 09/30/2004

on this date  
3rd time 2 different  
men waiting for me  
the guards

This is not the same  
Dictation  
Again this is Another channel  
Report Bx the Courtmark Page 1 of 1

Phone (941) 951-2663 Fax (941) 957-4437

Patient Name: FOX, MICHAEL  
Patient Number: 20029

D.O.S: 10/14/2004

**HISTORY:** The patient comes back to the office today a little bit early. He is very concerned about the Celebrex he has been taking. With the recent removal of Vioxx from the market, he is concerned that he has heard reports that Celebrex also being another potential problem. He also reports to me something that he has not told me before and even admitted that he did not tell me that he was having some "chest discomfort." Not sure whether this is really truly coming from his heart or this could be gastric irritation coming from the Celebrex. But, indeed he has stopped it. Now since he stopped this, he is having increasing pain in the knee. Under these circumstances, I have also explained to him that I am extremely concerned about recommending any further antiinflammatory medications until we know for sure whether we may be dealing with a gastric ulcer or whether this truly could be coming from his heart. I told him that with these particular symptoms this would also preclude any surgical intervention until he has a complete GI and/or cardiac workup to make sure we are not dealing with any other underlying problems that could cause postoperative complications.

**PHYSICAL EXAMINATION:**

**VITALS SIGNS:** BP 127/83 and pulse 78.

**LEFT KNEE:**

Inspection: No swelling, deformity, erythema, or ecchymosis.

Palpation: Knee is cool. No joint effusion.

Range of motion: Full extension and flexion about 120 degrees. Moderate pain on palpation along the medial joint line. No gross gaping with varus or valgus stressing. Minimal patellofemoral crepitus. CSM is intact.

**IMPRESSION:**

1. Degenerative arthritis, left knee.
2. Left knee/leg pain.

**RECOMMENDATION:**

1. We will give him Ultracet trial 1-2 q.4-6h. p.r.n. severe pain.
2. Hold off on any further NSAIDS until we can find out for sure whether we are dealing with a gastric problem and/or whether this could be cardiac.
3. Strongly recommend a GI assessment first as that would be my first suspicion that this is probably reflux-related. If that turns out to be negative, then he may need cardiac workup before we can even consider continuing any antiinflammatory medications. No other change in previous recommendations. We will re-followup in 6-8 weeks as previously noted. Prescription for Ultracet given. Work Comp form was filled out.

Walter K. Furman, M.D.  
WKF:sdq

d: 10/14/2004

t: 10/15/2004

*No self Chronic Pain management  
in this Report like was said in  
Furman's Reading*

MILAGE AND WEEKLY CHECKS-DOCTOR REQUESTS--CNA

MICHAEL FOX  
GERERAL DELIVERY  
INCLINE VILLAGE NEVEDA 89450

CLAIM NUMBERS  
02--60829087  
03--60838262

JUNE 12 2297

*Mailed Certified*  
*7004 1350 0005 6967 2070*  
*my copy*

HELLO JENNEY MOYSON

MICHAEL FOX HERE... I AM THE CASE YOU RECIEVED FROM CHARLES BARD TO REFRESH YOUR MEMORY....I AM SENDING YOU THIS LETTER REQUESTING A FEW THINGS..

THE FIRST REQUEST IS FOR MILAGE REIMBURSTMENT, WHICH ARE FAR PAST DUE. AND WHICH I HAVE REQUESTED BEFORE.. BUT EVERYONE SEEMS TO IGNORE THIS REQUEST FOR MILAGE REIMBURSTMENT..... AND THE ADDITIONAL MILAGE THAT I HAVE DRIVEN SINCE.... YOU SHOULD HAVE THESE REQUESTS FOR MILAGE IN YOUR FOLDER..BUT I WAS NEVER PAID....

THESE ARE MILAGE CHARTS THAT ARE DUE FOR DRIVING TO DOCTORS OFFICES, HOSPITALS, PHARMACIES, ATTORNEY OFFICE APPOINTMENTS AND ECT....

WHICH WAS REQUESTED TO BE PAID WHEN AMY BARNET AND ANNA SALES WHERE THE CASE MANAGERS... I ALSO REQUESTED PAYMENT WHEN CHARLES BARD WAS TRANSFERED TO MY MEDICAL CASES... AND AS AGAIN, I WAS NEVER PAID MY MILAGE...

SO AGAIN I AM REQUESTING FOR THESE BENIFITS, WHICH ARE WELL PAST DUE... AND WHICH CAN BE PAID AT THE CURRENT MILLAGE RATE OF EXPENSES...

THERE WILL BE TWO LARGE MILAGE CHARTS.. ONE FROM WHEN ANA SALES WAS THE CASE MANAGER--DRIVING TO DOCTOR APPOINTMENTS, ATTORNEY APPOINTMENTS AND MICHAEL FOX HAVING TO DRIVE FROM HENDERSON NEVEDA TO FORT MEYERS FLORIDA.. IN APRIL 2005... THE REASON THAT ANNA SALES REFUSED TO GET ME DOCTORS. APPOINTMENTS IN HENDERSON, AND LAS VEGAS NEVEDA AREA.

AND THE SECOND LARGE MILAGE CHART WHEN CHARLES BARD WAS THE CASE MANAGER---MICHAEL FOX HAVING TO DRIVE FROM LOS ANGES CALIFORNIA TO FORT MEYERS FLORIDA.. IN APRIL 2006.. WHEN CHARLES BARD WAS UNABLE TO GET DOCTOR APPOINTMENTS WHEN I WAS LIVING IN CHORPUS CHRISTI TEXAS.... AND I AGAIN HAD TO MOVE BECAUSE OF THE GOVERMENT POLICE THAT POLICE ME....

I HAD TO DRIVE BACK TO FLORIDA BOTH TIMES, DUE TO THE I YEAR TIME PERIOD OF MY WORKERS COMP CLAIMS BEING CLOSED...

THAT ANNA SALES WAS UNABLE, AND OR, UNWILLING TO SUPPLY DOCTORS FOR THIS LOCATION WHERE MICHAEL FOX HAD MOVED TO IN HENDERSON NEVEDA.....

THAT CHARLES BARD WAS UNABLE, AND OR UNWILLY TO SUPPLY DOCTORS FOR THE AREA WHERE MICHAEL FOX WAS LIVING AT THE TIME IN CHORPUS CHRISTI TEXAS..

THAT MICHAEL FOX HAD TO DRIVE BACK TO FLORIDA TO KEEP THE ONE YEAR DOCTOR VISITS UP. OR BOTH OF THESE WORKER COMP CASES WOULD BE CLOSED DUE TO CNA INSURANCE GUIDE LINES..

ATTACHED HERETO ARE MILAGE CHARTS.. WHICH ARE EXHIBITS 1-A Thru 1-G

THE SECOND REQUEST IS TO START MY WORKER COMP CHECKS.....

THIS UTTER NONSENSE, ME HAVING TO WAIT UNTIL THERE IS AN OPPEARATION, WHEN I KEEP GETTING SIDE LINE ON DIFFERENT ISSUES, AND I AM CONSTANTLY WAITING TO GET APPOINTMENTS AND SEE DOCTORS..

I AM ENTITLED TO RECIEVE THESE CHECKS RIGHT NOW.... SO I AM REQUESTING THESE CHECKS TO BE PAID NOW...



MILAGE AND WEEKLY CHECKS-DOCTOR REQUESTS--CNA

ALSO...I BELIEVE I AM ENTITLED TO BACK PAY SINCE OCTOBER 3 2003 MY LAST DAY OF WORK, AT RJ VANN MECHANICAL IN FORT MEYERS FLORIDA....

THAT DOCTOR RICHARD RICHLEY HAS FOUND THAT MICHAEL FOX IS NOT AT MAXIUME MEDICAL IMPROVEMENT.. AND THAT I AM REQUESTING PAYMENT SINCE RJ VANNS MECHANICAL LAYING OFF MICHAEL FOX....

SINCE I COLLECTED UNEMPLOYMENT FOR 26 WEEKS SINCE BEING LAYED OFF, ON OCT 3 2003.. THAT WORKER COMP CHECKS FOR THESE BENIFITS WILL GO INTO EFFECT ON APRIL 4 2004.

THAT MICHAEL FOX IS ENTITLED TO WEEKLEY CHECKS IN THE AMOUNT OF 440.98 WHICH IS TOTAL DISABILTY CHECK AMOUNT...

I HAD SENT A LETTER TO DEBRA WADE WHO WAS THE FIRST AJUSTER, REGARDING THE WRONG AMOUNT OF TOTAL DISABILITY CHECK AMOUNT, ALONG WITH COPIES OF THE CHECK STUBS FROM RJ VANN MECHANICAL...

I SENT THIS LETTER TO HER ON DECEMBER 12 2002....SO IF YOUR FILE IS IN ORDER YOU CAN FIND IT BY THE DATE I SENT IT...

THIS ALSO CHANGED MY TEMPORAY DISABILITY CHECK AMOUNT TO 423.39 PER WEEK... WHICH IS ALSO PART OF THE LETTER I SENT TO DEBRA WADE THE AJUSTER FROM CNA INSURANCE..

I HAVE A COPY OF THE LETTER IN MY FOLDER.. ALONG WITH THE COPYS OF MY EMPLOYMENT CHECKS.....

IF YOU REQUEST, I WILL RESEND THESE COPIES OF CHECKS TO YOU..

THE WRITTEN ESTIMATE OF OF THE ABOVE FIGURES FOR WORKER COMP CHECKS OWING, ARE ATTACHED HERETO AS EXHIBIT 2

PLEASE MAIL ALL REIMBUSTMENT FOR MILAGE, AND PAST DUE AND CURRENT CHECKS TO  
MICHAEL FOX  
GERNERAL DELIVERY  
INCLINE VILLAGE NEVEDA 89450

I HAVE HAD TO BATTLE THE INSURANCE AJUSTERS FOR TREATMENT, I HAVE HAD TO BATTLE DOCTORS FOR TREATMENT, I HAVE HAD TO BATTLE RJ VANNS MECHANICAL EMPLOYEES..

I HAVE HAD TO BATTLE MY ATTORNEYS WHO TRIED TO RAIL ROAD ME INTO A SETTLEMENT ALONG WITH YOUR MEDIATOR THAT YOU HIRED..

I HAVE BATTLED THE GOVERMENT POLICE FORCES THAT PATROL ME... I HAVE BEEN IN A STAGED CAR WRECK IN FORT MEYERS FLORIDA TOTALING MY VEHICAL ON NOVEMBER 30 2002..

I WOULD ALSO BET I AM BATTLING CNA INSURANCE PRIVATE DETECTIVES AND SECURITY FORCES... ALL OF THIS FOR WHAT.... I HAVE NEVER WITNESSED OR EVER SEEN SUCH SICKNESS... AND I AM TIRED OF IT....

I HAVE ALSO SENT YOU COPYIES OF EMAIL TRANSMISSIONS FROM DOCTOR RICHARD RICHLEYS OFFICE AND MYSELF... AS OF RIGHT NOW I AM STUCK IN LIMBO... AND I AM WAITING FOR A APPOINTMENT DATE TO SEE THE PULMINARY DOCTOR.....

COPYIES OF EMAILS ATTACHED HERETO AS EXHIBIT 3-A Thru 3-G

I AM UTTERLY SICK AND TIRED OF THIS CONTINUING NONSENSE, AND NOW I HAVE BEGUN DRIVING ACROSS THE UNITED STATES BACK TO FLORIDA TO SEE ATTORNEYS BECAUSE OF THIS CONTINUING NONSENSE.....

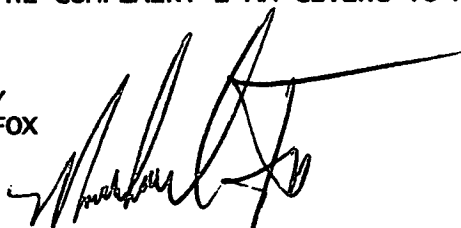
I HAVE ALWAYS ACUSED AND ALWAYS WILL, THAT ITS MY BELIEF THAT THIS IS JUST ANOTHER WAY THE GOVERMENT, AND INSURANCE COMPANYS AND POLICE TRY TO PROVOKE AND INTIMADE MICAEL FOX, AND TO FURTHER CAUSE AS MUCH EMOTIONAL AND IREPTABLE HARM, TO CAUSE ME TO TAKE A CASH SETTLEMENT....

I WILL BE MAILING THIS LETTER TO YOU AS I AM CROSSING THE UNITED STATES TO SEE ATORNEYS IN FLORIDA..

I WILL BE STOPPING BY YOUR OFFICE TO SEE YOU... AND TO SEE WHAT YOUR ANSWERS ARE... BEFORE HIRING AN ATTORNEY...

IF CNA INSURANCE WANTS TO DISPOSE OF THESE TWO CLAIMS I CURRENTLY HAVE, AND MAKE MICHAEL FOX A SETTLEMENT OFFER... I WILL SIT DOWN AND LISTEN TO YOUR OFFER... I WILL ALSO BE BRING A COPY OF THE COMPLAINT I AM GIVING TO ATTORNEYS IN FLORIDA FOR A PENDING LAWSUIT....

SINCERELY  
MICHAEL FOX



These Are Mileage Charts To The Current Time

Some Are Huge Due To CNA not Getting Michael Fox Any Doctors in the states I Had moved To.

Page 1 — Total miles on Page one 652.90

Page 2 — Total miles on Page Two 413.32

Page 3 — Total miles on Page Three 1630.80

Page 4 — Total miles on Page Four 10,314.00

Page 5 — Total miles on Page Five 7571.00

---

Total Miles 20,582.<sup>02</sup>

45.5 cents Per mile Times 20,582.<sup>02</sup> miles

Total Amount Due For Mileage is

\$9328.41

Exhibit 1-A

Date	Where from	Where To	Miles	Notes
2-17-02	Home 19109 Harbour Tree Ct North Fort Myers FL	1533 Hendrey street Fort Meyers Florida	13.6	Jerome Sico LAWYER
12-23-02	19109 Harbour Tree Ct North Fort meyer FL	1533 Hendrey street fort Meyers Florida	13.6	<del>Jerome Sico</del> LNU of <del>firm</del>
2-24-02	Home 19109 Harbour Tree Ct North fort Meyers FL	15050 Cleveland Ave. North Fort Meyer FL	3.6	Prescriptions Eckard Drugs
2-27-02	Home 19109 Harbour Tree Ct North Ft meyers FL	2745 Swamp Cabbage Ct Ft Meyers FL 33901	12.6	Kagan's office office visit
1-6-03	Home 5282 Guest Ct. North Fort Meyers FL	1533 Hendrey street fort Meyers Florida	9.7	Attorneys office Jerome Sico
2-3-03	5282 Guest Ct North fort Meyers FL	2745 Swamp Cabbage Ct Ft. Meyers FL 33901	12.6	John Kagan office
2-27-03	5282 Guest Ct. North fort meyers Florida	1533 Hendrey street fort Meyers Florida	9.7	Attorneys office Jerome Sico
2-21-03	5282 Guest court North fort meyer FL	2275 Main street Ft Meyers Florida	9.4	Deposition
2-21-03	5282 Guest court North fort Meyers FL	1533 Hendrey street fort Meyers Florida	9.7	Attorneys office Jerome Sico
4-1-03	Home 5262 Guest Ct. North fort meyers FL	2745 Swamp Cabbage Ct Fort Meyers FL 33901	12.6	Kagan's office medical Records
4-8-07	Home 3726 Whidbey way Naples Florida	2745 Swamp Cabbage Ct Fort Meyers FL 33901	72.6	John Kagan Deposition
4-28-03	3726 Whidbey way Naples Florida	2745 Swamp Cabbage Ct Fort Meyers FL 33901	72.6	Kagan office visit
6-23-03	3726 Whidbey way Naples Florida	2745 Swamp Cabbage Ct. fort Meyers FL 33901	72.6	Kagan office visit
8-15-03	Injured at worksite new Golden Gate High school 2925 Algonquin Rd Naples FL	Lee Community Center 2780 Cleveland Ave. Ft. Meyers Florida 33901	42.8	Hospital
8-15-03	Drop of Prescriptions Eckard Drugs 13180 North Cleveland Ave. North fort meyers FL	(Home) 3726 Whidbey way Naples Florida	80.2	Eckard Drugs Prescription
8-18-03	Home 3726 Whidbey way Naples Florida	15050 North Cleveland Ave North Fort Meyers Florida	109.0	Eckard Drugs
9-8-03	Home 3726 Whidbey way Naples Florida	Doctor L. Murgencia Black 13691 Metro Parkway Fort Meyers Florida	78.7	office visit with doctor

(Page 1)

TOTAL miles on this  
Page 15 652.9

Exhibit 1-B

Date	From	To	Miles	Notes
12-3-03	19109 Harbour Tree Ct North Fort Meyers Florida	Dr. Kania 3596 Broadway Fort Meyers Ft. 33901	22.82	Hernia Doctor office visit
12-2-03	19109 Harbour Tree Ct North Fort Meyers Ft	2275 MA street Fort Meyers Florida	14.1	2nd Deposition
12-11-03	19109 Harbour Tree Ct. North Fort Meyers Florida	13185 North Cleveland Ave North Fort Meyers Florida	12.9	Medication
12-29-03	19109 Harbour Tree Ct. North Fort Meyers Ft.	Dr. Kania 3596 Broadway Fort Meyers Florida	22.82	Sign Paper work Dr. Kania
1-8-04	19109 Harbour Tree Ct. North Fort Meyers Florida	Lee Memorial Hospital 2780 Cleveland Ave. Fort Meyers Florida	22.82	Surgery Pre-op
1-12-04	"	Lee Memorial Hospital 2780 Cleveland Ave. Fort Meyers Florida	22.82	<u>Surgery</u>
1-14-04	" All same Address	Dr. Kania 3596 Broadway Ft. Meyers Ft. 33901	22.82	Doctor office visit
1-19-04	"	Dr. Kania 3596 Broadway Ft Meyers Florida 33901	22.82	Doctors office visit
2-2-04	"	Dr. Kania 3596 Broadway 3596 Broadway Fort Meyer Florida 33901	22.82	Doctors office visit
2-17-04	"	Dr. Kania 3596 Broadway Fort Meyers Ft. 33901	22.82	Doctors office visit
3-3-04	"	Dr. Kania 3596 Broadway Fort Meyers Florida 33901	22.82	Doctors office visit
4-8-04	"	Dr. John Kagan 2745 Swamp Cabbage Ct. Ft Meyers FL 33901	24.36	Kagan's Deposition
6-17-04	19109 Harbour Tree Ct North Fort Meyers Florida	Pain Relief Center 8146 6th Ave Bradington Florida 34205	157.58	Pain Management Evaluation

Total miles on This  
Page Are

413.32

(Page 2)

Exhibit 1-C

Date	From	To	Mileage
April 19 2004	19109 Harbour Tree Ct. North Fort Myers 33903	Attorney Jerome Sico 1533 Hendry Street Fort Meyers Florida 33901	9.34 To 9.34 Home 18.64 Total <b>18.64</b>
April 24 2004	Home 19109 Harbour Tree Ct. North Ft Meyers FL 33903	Attorney Jerome Sico 1533 Hendry Street Fort Meyers Florida 33901	9.34 To 9.34 Home 18.64 Total miles <b>18.64</b>
May 13 2004	19109 Harbour Tree Ct. North Fort Meyers FL 33903	John Kasans office 2745 Swamp Cabbage Ct Fort Meyers Florida 33901	To - 12.18 Home 12.18 Total 24.36 Total miles <b>24.36</b>
May 17 2004	19109 Harbour Tree Ct North Fort Meyers FL 33903	John Kasan 2745 Swamp Cabbage Fort Meyers Florida 33901	To 12.18 Home 12.18 Total 24.36 Total miles <b>24.36</b>
May 20 2004	19109 Harbour Tree Ct. North Fort Meyers FL 33903	Dr Furmans 2750 Bahia Sarasota FL 34239	To 66.52 Home 66.52 Total 133.04 <b>133.04</b>
June 4 2004	19109 Harbour Tree Ct. North Fort Meyers Florida 33903	Dr. Furmans 2750 Bahia St. Sarasota Florida 34239	To 66.52 Home 66.52 Total 133.04 <b>133.04</b>
May 28 2004	19109 Harbour Tree Ct. North Fort Meyers Florida	Attorney Jerome Sico 1533 Hendry St. Fort Meyers FL 33901	To 9.34 Home 9.34 Total 18.64 <b>18.64</b>
June 8 2004	19109 Harbour Tree Ct. North Fort Meyers Florida	Dr John Kasan 2745 Swamp Cabbage Ct North Fort Meyers FL 33901	To 12.18 Home 12.18 Total 24.36 <b>24.36</b>
July 1 2005	19109 Harbour Tree Ct. North Fort Meyers Florida	Dr. Furmans 2750 Bahia Sarasota Florida 34239	To 66.52 Home 66.52 Total 133.04 <b>133.04</b>
July 15 2004	ALL These Dates Are From 19109 Harbour Tree North Fort Meyers Florida 33903	To Doctor Walter Furman 2750 Bahia Sarasota Florida 34239	Round Trip mileage is 133.04 Times 8 office visits
July 22 2004			
July 29 2004			
August 4 2004			133.04 Total miles for 8 trips
August 11 2004			
August 20 2004			<b>1064.32</b>
Sept 29 2004			
Oct 14 2004			
Oct 14 2004	19109 Harbour Tree Ct. North Fort Meyers Florida 33903	Eckard Drugs 2403 Cleveland Ave Fort Meyers Florida 33901	To 9.59 Back 9.59 Total 19.18 <b>19.18</b>
Oct 14 2004	19109 Harbour Tree Ct. North Fort Meyers FL 33903	Eckard Drugs 2403 Cleveland Ave Fort Meyers Florida 33901	To 9.59 Back 9.59 Total 19.18 <b>19.18</b>

(Page 3)

Exhibit 1-D

TOTAL miles on  
This Page Are  
1,630.8 Round Trip



4-4-05 Living	983 Bengt Point Ave Henderson Nevada 89015	DR. Kazlas 3596 Broadway Fort Meyers Florida 33901	one way 2483.15 miles	This is from when I lived in Henderson Nevada and had to Drive Back To Florida To See Doctors. Anna Sales unable to Get Doctors for michel fox
4-14-05	DR. Kazlas 3596 Broadway Fort Meyers FL 33901	DR. Furmans 2750 Bahia St. SARASOTA Florida 34239	one way 82.84 miles	
4-14-05	DR Furmans 2750 Bahia St. SARASOTA florida 34239	983 Bengt Point Ave Henderson Nevada 89015	one way 2408.73 miles	
4-5-06 Arriving 4-11-06	5440 W. Century Blvd. Los Angeles CA. 90045	DR. John Kagan 2745 Swamp Cabbage Ct. Fort Meyers Florida 33901	one way 2,665.73 miles	This is when I was Living in California. And Had to Drive Back to <del>California</del> Florida To See Doctors Charles Bard unable to Get Doctors for Michel fox
4-11-06	DR John Kagan 2745 Swamp Cabbage Ct. Fort Meyers Florida 33901	DR. Kazlas 3596 Broadway Fort meyers Florida 33901	one way 1.23 miles	
4-11-06	DR. Kazla's 3596 Broadway Fort Meyers Florida 33901	5440 W Century Blvd. Los Angeles CA. 90045	one way 2672.25 miles	

These charts Are  
From when I moved  
To Another state  
And CNA Did not Get  
Doctors For me.  
And me Having To Drive  
Back To Florida To Get  
Cases open.

Total miles on this  
Page equal

(Page 4)

2483.15  
82.84  
2408.73  
2665.73  
1.23  
2672.25  
10,313.93 Total  
miles

Round off to  
10,314 Total  
miles

Exhibit 1-E

Date	Driver From	Driver To	Round Trip M. Mile	Page 36 of 73
3-5-07	6348 College Grove Way San Diego CA. 92115	Dr Richard Richley office 3434 Midway Drive San Diego CA. 92110	22.0	orthopedic Doctor
3-6-07	6348 College Grove Way San Diego CA. 92115	" Richard Richley's office " 3434 Midway Drive San Diego CA 92110	22.0	Orthopedic Doctor
3-15-07	6348 College Grove Way San Diego CA. 92115	" All Below Ave Doctor Richley's office "	22.0	orthopedic Doctor
3-20-07	6348 College Grove Way San Diego CA 92115	" 3434 Midway Drive San Diego CA. 92110 "	22.0	orthopedic Doctor
4-4-07	6348 College Grove Way San Diego CA. 92115	" " "	22.0	Orthopedic Doctor
4-6-07	6348 College Grove Way San Diego CA. 92115	" " "	22.0	Orthopedic Doctor
4-10-07	6348 College Grove Way San Diego CA. 92115	" " "	22.0	Orthopedic Doctor
4-16-07	6348 College Grove Way San Diego CA. 92115	" " "	22.0	Orthopedic Doctor
4-26-07	6348 College Grove Way San Diego CA. 92115	" " "	22.0	Orthopedic Doctor
4-30-07	6348 College Grove Way San Diego CA. 92115	" Dr Richard Richley 3434 Midway Drive San Diego CA. 92110	22.0	Richard Richley Doctor
5-1-07	6348 College Grove Way San Diego CA. 92115	" Dr Richard Richley 3434 Midway Drive San Diego CA. 92110	22.0	Orthopedic Doctor
5-2-07	153 Country Club Drive Incline Village Nevada 89450	" Surgical Center 3434 Midway Drive San Diego CA. 92110	22.0	Surgical Center
5-3-07	6348 College Grove Way San Diego CA. 92115	" Dr. Nguyen 3434 Midway Drive San Diego CA. 92110	22.0	Pre op Doc Dr. Nguyen
5-4-07	6348 College Grove Way San Diego CA. 92115	" Dr Richard Richley 3434 Midway Drive San Diego CA. 92110	22.0	Orthopedic Doctor
5-26-07	153 Country Club Drive Incline Village Nevada 89450	Dr. Vapnek 4033 3rd Ave Suite 400 San Diego CA. 92103	1083.12	Urologist Doctor
5-29-07	6348 College Grove Way San Diego CA. 92115	Richard Richley 3434 Midway Drive San Diego CA. 92110	22.0	Orthopedic Doctor
6-5-07	6348 College Grove Way San Diego CA. 92115	Richard Richley 3434 Midway Drive San Diego CA 92110	22.0	Orthopedic Doctor
7-10-07	153 Country Club Drive Incline Village Nevada 89450	Attorney's office 103 Northeast 4th street Ft. Lauderdale FL 33301	6136.0	Attorney's Office

(Page 5)

TOTAL Mileage on this

Page 15

7571.12

Exhibit 1-F



Mailed Copies To Amy Barnett on March 23 2004

Called Amy Barnett on 4-2-04 for mileage  
Reimbursement.

Amy Barnett tells Fox she has new Case Worker.

I call Anna Salee 4-2-07

I never receive call

I call 4-5-07 Leave another call 222 PM  
no return call

I call again on 4-8-07 And talk to

Anna Salee I never receive any payment for mileage  
she tells Fox she will call me later

I never hear a thing from this Lady

Exhibit 1-G

# Amount Due For Back weekly checks

423.39 Per week Amount For Temporary Disability

April 4 2004 To April 3 2005 = 52 weeks

April 4 2005 To April 3 2006 = 52 weeks

April 4 2006 To April 7 2007 = 52 weeks

April 4 2007 To July 15 2007 = 16 weeks

---

172 weeks TOTAL

423.39	weekly check
172.	weeks Due
<hr/> 78,823. <sup>08</sup>	TOTAL Due For weekly checks Past Due

Please Mail all Checks To General Delivery  
Michael Fox Incline Village  
Nevada 89450

And Continue to Mail weekly checks To This Address

Thankyou

Michael Fox

Exhibit 2



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From: Laser Spine Surgery Institute Richard C. Richley, MD  
<laserspine@hotmail.com>

Inbox

Sent: Wednesday, April 18, 2007 5:24 PM

To: lfox449@hotmail.com

Subject: we never made that pre-op appointment

hi michael, i still haven't heard anything from your adj, but i did want to make your pre-op appointment with us. i have 5-1-07 avail. if that is okay with you. when you come by on friday, remind me to make that appointment.

thanks!  
sibely

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From: Laser Spine Surgery Institute Richard C. Richley, MD  
<laserspine@hotmail.com>

Sent: Tuesday, May 22, 2007 7:46 PM

To: lfox449@hotmail.com

Subject: the scheduling of your exams.

Inbox

dear mr. fox,

I received auth. from your nurse case manager gwynn, to schedule your ct of your chest, and doppler of your right leg. I went ahead and fax all the order to scripps memorial hospital in la jolla. all you have to do is call them to schedule the appointments. their phone number is: 858-626-6800 for the radiology scheduling department.

regarding your referral to a pulmonologist, dr. spitz does not take work comp cases. dr. nguyen's office doesn't refer to any other dr. so we faxed over a list of local pulmonologist to your nurse case manager and we will wait for her to pick one that is in network with you work comp insurance. as soon as I get some more info regarding this I will let you know.

please give us a call after you schedule everything for your follow up.  
if you have any question please give us a call.

thank you,

sibely

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From : Laser Spine Surgery Institute Richard C. Richley, MD  
<laser spine@hotmail.com>  
Sent : Wednesday, June 6, 2007 2:37 PM  
To : LFOX449@HOTMAIL.COM  
Subject : UPDATE

I CALLED THE PULMONOLOGIST'S OFFICE, THEY SAID THAT THEY WOULD HAVE AN ANSWER FOR US  
HOPEFULLY THE ENDING OF THIS WEEK, OR NEXT WEEK. I'LL LET YOU KNOW AS SOON AS I KNOW.

THANK YOU!

SIBELY H.

Like puzzles? Play free games & earn great prizes. Play Clink now.

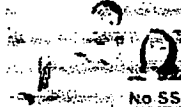
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10-Year	\$179,995 Loan
Fixed	for \$442/month
15-Year	\$149,799 Loan
Fixed	for \$364/month
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ARM	for \$397/month
5-Year	\$214,179 Loan
ARM	for \$664/month

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From : michael fox &lt;lfox449@hotmail.com&gt;

Sent : Monday, June 18, 2007 10:46 AM

To : laserspine@hotmail.com

Subject : —MY PULMINARY DOCTOR—

| | X | Inbox

HELLO TO THE SECRETARY STAFF OF DR. RICHARD RICHLEYS OFFICE....

MICHAEL FOX HERE REGARDING THE SCHEDULING OF PULMINARY DOCTOR...

I AM WONDING WHATS HAPPENING WITH THE PULMINARY DOCTOR THAT GWENN FROM CNA INSURANCE WAS TO BE SETTING UP....

CAN YOU SEND ME SOME KIND OF A UPDATE ON WHATS HAPPENING....

THANKS

MICHAEL FOX

---

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Game.****Trip For Two  
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Credentials****\$2000  
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From : Laser Spine Surgery Institute Richard C. Richley, MD  
<laser spine@hotmail.com>

[Inbox](#)

Sent : Monday, June 18, 2007 5:13 PM

To : lfox449@hotmail.com

Subject : re your pulmonary visit

dear mr. fox

I just wanted to let you know that I still haven't heard anything from dr. kavy's office. I left the girl elsa another message for her to call me back. I did speak to her last week and she stated that the doctor would be making that decision, that he wasn't in that day and she would be calling me back. as soon as I hear from her, I will drop you a line.

thanks!

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From : Laser Spine Surgery Institute Richard C. Richley, MD  
<laser spine@hotmail.com>

| 
 | 
 | 
 Inbox

Sent : Wednesday, June 27, 2007 2:36 PM

To : lfox449@hotmail.com

Subject : regarding your appointment.

dear mr. fox

i just wanted to update you regarding your appointment with the pulmonologist. i have been trying for weeks now to get a response if they will take you as a patient. unfortunately the only person that handles this never returns my call. i finally got fat up and left a message with her supervisor. when that happens i usually get a call back from someone. i hope to have a definite answer for you soon. thank you for your patience. as soon as i hear from them, i will let you know.

thank you!

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From: Laser Spine Surgery Institute Richard C. Richley, MD  
<laserspine@hotmail.com>

[Inbox](#)

Sent: Friday, June 29, 2007 4:48 PM

To: lfox449@hotmail.com

Subject: your appointment with a pulmonologist

Dear Mr. Fox

I have some good news, I was finally able to get you auth. to see dr. kavy. I faxed over your info and the should be e-mailing you soon to schedule an appointment. they said it would be towards the end of July. please let me know when your appointment is. if you need to speak to someone try roxanne karris.  
(858)637-6616

thank you,

sibely

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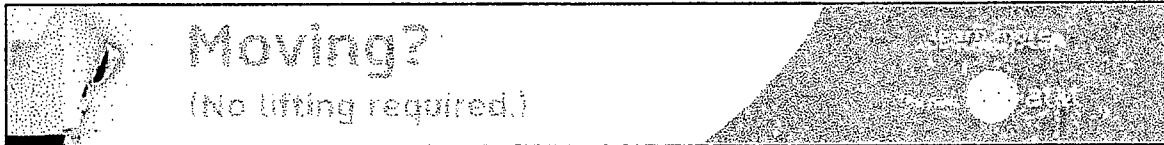
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From: michael fox &lt;lfox449@hotmail.com&gt;

Sent: Sunday, July 1, 2007 11:54 PM

To: laserspine@hotmail.com

Subject: RE: your appointment with a pulmonologist

[Inbox](#)

HELLO MY DEAR SECRETARIES FROM DCOTOR RICHARD RICHLEY OFFICE

HOPE ALL IS GOOD, FOR YOU ALL...

TO GET TO BUSINESS.... THIS EMAIL IS IN RESPONSE TO A EMAIL I RECIEVED FROM SIBELY, WHICH IS BELOW THIS EMAIL IF YOU SCROLL DOWN....

SO I GUESS I SHOULD ADRESSS THIS TO SIBELY..

HI SIBLEY, I RECIEVED YOUR EMAIL, REGARDING THE DOCTOR, BUT I HAVE NOT HEARD A THING FROM THEM...

SO I WAS WONDERING IF YOU COULD JUST SET THE APPOITMENT WITH THIS DOCTOR, AND SCHEDULE IT FOR ANYTIME ON ANY DAY, AT THE END OF THE MONTH OF JULY.... AND EMAIL ME A DATE A TIME AND A LOCATION....

IF YOU WOULD, PLEASE KEEP CALLING THEM, AND BUGGING THEM. UNTIL THEY GIVE US A DATE AND A TIME.. THIS IS UTTERLY INSANE HOW LONG THIS HAS TAKEN...

THANKS FOR ALL YOUR HELP...

MICHAEL FOX

From: "Laser Spine Surgery Institute Richard C. Richley, MD" <laserspine@hotmail.com>  
 To: lfox449@hotmail.com  
 Subject: your appointment with a pulmonologist  
 Date: Fri, 29 Jun 2007 13:48:36 -0700

Dear. Mr. Fox

i have some good news, i was finnally able to get you auth. to see dr. kavy. i faxed over your info and the should be e-mailing you soon to schedule an appointment. they said it would be towards the end of july. please let me know when your appointment is. if you need to speak to someone try roxanne karris. (858)637-6616

thank you,

sibely

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From : michael fox <lfox449@hotmail.com>  
Sent : Friday, July 6, 2007 10:34 AM  
To : lfox449@hotmail.com  
Subject : RE: your appointment with a pulmonologist

HELLO SIBLEY

IF YOU SCROLL DOWN YOU WILL SEE EMAIL THAT I SENT, BUT I HAD NO RESPONSE FROM YOU...

SINCE THIS TIME, I HAVE CALLED THIS WOMEN YOU SAID TO CALL.. AND ALL I GET IS AN ANSWERING SERVICE.....

AND THIS WOMEN HAS YET TO SEND ME AN EMAIL AS I REQUESTED..... CAN YOU TRY TO GET IN TOUCH WITH THIS WOMAN, AND TELL HER TO SEND ME AN EMAIL..... WHY DOES THIS NONSENSE CONTINUE TO DRAG OUT... WHY IS IT SO DIFFUCULT FOR THIS LADY TO RESPOND...

THANK YOU  
MICHAEL FOX

From: "michael fox" <lfox449@hotmail.com>  
To: laserspine@hotmail.com  
Subject: RE: your appointment with a pulmonologist  
Date: Sun, 01 Jul 2007 23:54:34 -0400

HELLO MY DEAR SECRETARIES FROM DCOTOR RICHARD RICHLEY OFFICE

HOPE ALL IS GOOD, FOR YOU ALL...

TO GET TO BUSINESS.... THIS EMAIL IS IN RESPONSE TO A EMAIL I RECIEVED FROM SIBELY, WHICH IS BELOW THIS EMAIL IF YOU SCROLL DOWN....

SO I GUESS I SHOULD ADRESSS THIS TO SIBELY..

HI SIBLEY, I RECIEVED YOUR EMAIL, REGARDING THE DOCTOR, BUT I HAVE NOT HEARD A THING FROM THEM...

SO I WAS WONDERING IF YOU COULD JUST SET THE APPOITMENT WITH THIS DOCTOR, AND SCHEDULE IT FOR ANYTIME ON ANY DAY, AT THE END OF THE MONTH OF JULY.... AND EMAIL ME A DATE A TIME AND A LOCATION....

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THANKS FOR ALL YOUR HELP...

MICHAEL FOX

From: "Laser Spine Surgery Institute Richard C. Richley, MD"  
<laserspine@hotmail.com>  
To: lfox449@hotmail.com  
Subject: your appointment with a pulmonologist  
Date: Fri, 29 Jun 2007 13:48:36 -0700





Dear. Mr. Fox

i have some good news, i was finnally able to get you auth. to see dr. kavy. i faxed over your info and the should be e-mailing you soon to schedule an appointment. they said it would be towards the end of july. please let me know when your appointment is. if you need to speak to someone try roxanne karris. (858)637-6616

thank you,

sibely

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**From :** Laser Spine Surgery Institute Richard C. Richley, MD  
<laserspne@hotmail.com>  
**Sent :** Friday, July 6, 2007 5:55 PM  
**To :** lfox449@hotmail.com  
**Subject :** your appointment

[Inbox](#)

I spoke to roxanne, she said that you should have received an e-mail from elsa with your appointment and directions. Is you haven't here it is: 8-9-07 @ 1:15pm.  
If you have any questions, please write me back.

thanks!  
sibely

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From: michael fox &lt;lfox449@hotmail.com&gt;

Sent: Monday, July 9, 2007 10:02 AM

To: laserspine@hotmail.com

Subject: RE: your appointment

Inbox

HELLO SIBLEY

I HAVE HEARD NOTHING FROM NOBODY....

I HAVE NEVER RECIEVED AN EMAIL FROM ROXANNE, AND I HAVE NEVER RECIEVED AND EMAIL FROM THIS NEW WOMAN ELSA....

PLEASE SEND ME AN ADDRESS AND PHONE NUMBER AN AND THIS DOCTORS NAME.....

THANKS FOR CALLING THIS ROXANNE, ALL I EVER GOT WAS A ANSWERING SERVICE.. THIS ROANNE NEVER EMAILED ME AS I REQUESTED...

MICHAEL FOX

From: "Laser Spine Surgery Institute Richard C. Richley, MD"

&lt;laserspine@hotmail.com&gt;

To: lfox449@hotmail.com

Subject: your appointment

Date: Fri, 06 Jul 2007 14:55:37 -0700

i spoke to roxanne, she said that you should have received an e-mail from elsa with your appointment and directions. is you haven't here it is: 8-9-07 @ 1:15pm.

if you have any questions, please write me back.

thanks!

sibely

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**From :** Laser Spine Surgery Institute Richard C. Richley, MD  
<laserspine@hotmail.com>  
**Sent :** Monday, July 9, 2007 2:58 PM  
**To :** lfox449@hotmail.com  
**Subject :** roxanne and elsa's info

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dear mr. fox,

here is the contact info for both elsa and roxanne. please let me know that you did get scheduled.  
thanks!

elsa: (858) 939-6515  
roxanne, elsa's supervisor: (858)637-6616

dr. steven kavy  
5525 grossmont center dr.  
la mesa, ca 91942

DR. kavy is only at that site on wed. his main office # is (858)939-6570

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MICHAEL FOX  
GENERAL DELIVERY  
INCLINE VILLAGE NEVEDA 89450  
TEMPORARY MAILING ADDRESS

MICHAEL FOX  
PO BOX 111621  
NAPLES FLORIDA 34108  
GENERAL MAILING ADDRESS

UNITED STATES DEPARTMENT OF JUSTICE  
950 PENNSYLVANIA AVE. NW  
WASHINGTON DC 20530

SECTION CIVIL RIGHTS DIVISION  
CRIMINAL SECTION PHB  
-----AND-----  
COMPLAINT ADJUDICATION OFFICE NALC

TO THE DEPARTMENT OF JUSTICE

I HAVE WRITTEN THE FOLLOWING COMPLAINT OF MY CIVIL RIGHTS BEING VIOLATED RELENTLESSLY, I AM UNABLE TO RECIEVE ANY LAW FIRM FOR REPRESENTATION, WHICH IS ALSO PART OF THE COMPLAINT.

THIS COMPLAINT HAS A LITTLE HISTORY OF THE ABUSE I HAVE TAKEN, THEN WILL LEAD YOU INTO THE STAGED CAR WRECK IN GALVISTON TEXAS, THEN ABOUT VICE PRESIDENT DICK CHENEY GOING TO TEXAS AND ALEDGEDLY SHOOTING HIS LONG TIME FRIEND HARRY WHITTINGTON IN THE FACE.

THIS COMPLAINT WILL GO INTO HOW MICHAEL FOX THE PLAINTIFF HAS HAD TO FIGHT INSURANCE AJUSTERS FROM AMICA INSURANCE, AND THE NONSENSE THAT THIS INSURANCE COMPANY AND THERE AJUSTERS HAVE CAUSED THE PLAINTIFF MICHAEL FOX.

THERE ARE MANY DEFENDANTS IN THIS CASE, DO NOT LET THIS THROW YOU OFF, READ THIS COMPLAINT AND YOU WILL UNDERSTAND.

I WILL BE ADDING TO THIS COMPLAINT, IN THE NEXT THREE TO FOUR MONTHS. WHICH WILL BE BETTER DETAILED

I AM ALSO GIVING THIS COMPLAINT TO A FEW SENATORS, AND CONGRESSMAN, WHILE I AM HERE IN WASHINGTON DC.

I AM CURRENTLY LIVING ON THE ROAD, I HAVE NO PHONE, AND CAN ONLY BE REACHED BY MAIL, OR BY EMAIL.

MY EMAIL ADDRESS IS LFOX449@HOTMAIL.COM---ALL SMALL CAPS....

IF YOU DO NOT HELP MYSELF IN THIS COMPLAINT THAT I HAVE FILED WITH YOU. THIS WILL CONTINUE TO BE A GREAT MISCARRAIGE OF JUSTICE, UNTIL THERE IS SOMETHING DONE ABOUT IT.

I HAVE ALWAYS STATED, THAT THE PEOPLE WITH GREAT AUTHORITY AND POWER, WITH ALL THERE WEALTH, ARE BASICLY EXEMPT FROM ANY CRIDINAL PROSECUTION.

SINCERELY  
MICHAEL FOX


  
8-2-07

Exhibit 8

Untitled

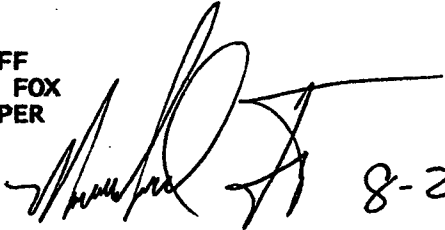
COPY OF COMPLAINT FROM MICHAEL FOX

SERVED ONTO UNITED STATES DEPARTMENT OF JUSTICE..

RECEIVED BY Gen. Clerk.  
W.T. LEE, DOJ / Main Bldg - Mail Room ON AUGUST 2 2007

BU/206

PLAINTIFF  
MICHAEL FOX  
IN PRO PER

 8-2-07

U.S. Department of Justice



Civil Rights Division

MJK:aw:lfb  
DJ 144-74-0

Criminal Section - PHB  
950 Pennsylvania Avenue, N.W.  
Washington, DC 20530

SEP 14 2007

Mr. Michael Fox  
P.O. Box 111621  
Naples, FL 34108

Dear Mr. Fox:

~~This is a response to your letter dated August 2, 2007, in~~  
which you allege amongst other allegations that your civil rights  
are being relentlessly violated. You allege that your complaint  
involves a staged car wreck in Galveston, Texas and Vice  
President Dick Cheney allegedly shooting his long time friend  
Harry Wittington in the face.

The Criminal Section of the Civil Rights Division is  
responsible for enforcing federal criminal civil rights statutes.  
Much of our enforcement activity relates to the investigation and  
prosecution of deprivations of civil rights under color of law.  
These matters generally involve allegations of excessive physical  
force or sexual abuse by law enforcement officers.

We have carefully reviewed the information which you  
furnished. However, we have determined that your complaint does  
not involve a prosecutable violation of federal criminal civil  
rights statutes. Accordingly, we are unable to assist you.

You may wish to contact the nearest legal aid program or the  
local bar association to determine whether they may be able to  
assist you.

Sincerely,

Mark J. Kappelhoff  
Section Chief  
Criminal Section  
Civil Rights Division

By:

A handwritten signature in cursive script, appearing to read "Alexis Weiss", is written over the typed name.

Alexis Weiss  
Paralegal Specialist  
Criminal Section

Exhibit 10

U.S. Department of Justice

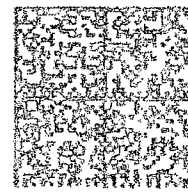
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Washington, D.C. 20530

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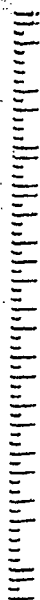


Exhibit 10 2nd Page

Untitled

COPY OF COMPLAINT FROM MICHAEL FOX

SERVED ONTO MEMBERS OF THE US SENATE AND CONGRESSMAN

RECIEVED BY George Bully ON AUGUST 2 2007

PLAINTIFF  
MICHAEL FOX  
IN PRO PER

Senator HARRY Riel of Nevada

Exhibit 11 (11)



Untitled

COPY OF COMPLAINT FROM MICHAEL FOX

SERVED ONTO MEMBERS OF THE US SENATE AND CONGRESSMAN

RECIEVED BY *[Signature]* ON AUGUST 2 2007

*Katre M Willis*

PLAINTIFF  
MICHAEL FOX  
IN PRO PER

*Debra Stabenow*  
*Served on office*

Untitled

COPY OF COMPLAINT FROM MICHAEL FOX

SERVED ONTO MEMBERS OF THE US SENATE AND CONGRESSMAN

RECIEVED BY George Dudley ON AUGUST 2 2007

PLAINTIFF  
MICHAEL FOX  
IN PRO PER

Senator Dianne Feinstein of California

Untitled

COPY OF COMPLAINT FROM MICHAEL FOX

SERVED ONTO MEMBERS OF THE US SENATE AND CONGRESSMAN

RECIEVED BY *Boyle Bulley* ON AUGUST 2 2007

PLAINTIFF  
MICHAEL FOX  
IN PRO PER

*Senator Bill Nelson of Florida*

Untitled

COPY OF COMPLAINT FROM MICHAEL FOX

SERVED ONTO MEMBERS OF THE US SENATE AND CONGRESSMAN

RECIEVED BY B. Dickerson ON AUGUST 2 2007

B. Dickerson

PLAINTIFF  
MICHAEL FOX  
IN PRO PER

Congressman John Conyers & Michael

MICHAEL FOX  
PO BOX 111621  
NAPLES FLORIDA 34108

EMAIL ADDRESS  
LFOX449@HOTMAIL.COM—SMALL CAPS

DEAR==SENATORS AND CONGRESSMAN OF THE UNITED STATES OF AMERICA..

MY NAME IS MICHAEL FOX, AND I HAVE COME TO YOU TO SEE IF YOU WILL HELP ME.  
I CAN FIND NO ATTORNEY TO HANDLE THIS CASE FOR REPRESENTATION... IN THIS HUGE CIVIL AND CRIMINAL COMPLAINT....

FURTHERMORE— MYSELF GIVING THIS COMPLAINT TO THE(FBI) ON MARCH 28 2007 IN SAN DIEGO CA... AND TO THIS CURRENT TIME AND DATE, MICHAEL FOX NEVER HEARING A THING REGARDING THIS COMPLAINT, BUT ONLY TO HERE THIS IS AN ON GOING INVESTIGATION.....

PART OF THIS COMPLAINT THAT FOLLOWS IS REGARDING HOW THE GOVERMENT POLICE AND SECURITY COMPANYS, HAVE ATTACKED ME  
AND HAVE VIOLATED MY CIVIL RIGHTS RELENTLESSLY FOR WELL OVER 20 PLUS YEARS, AND NEARLY KILLING ME ON DIFFERENT OCASSIONS..

MAINLY THIS COMPLAINT IS IN REGARDS TO A STAGED VEHICAL WRECK THAT I WAS ALMOST KILLED, HAPPENED IN GALVISTON TEXAS ON FEB 4 2006, THEN DICK CHENEY THE VICE PRESIDENT OF THE UNITED STATES OF AMERICA, WITH THE ALLEDGED SHOOTING OF HIS ATTORNEY FRIEND, HARRY WHITTINGTON IN CHORPUS CHRISTI TEXAS...

THAT MICHAEL FOX HAVING BEEN IN MANY OTHER STAGED VEHICAL ACCIDENTS, AND INCIDENTS... AND RECENTLY HAVE NARROWLY MISSED BEING IN OTHER STAGED CAR INCIDENTS..

THIS COMPLAINT ALSO HAS ANOTHER PART OF IT REGARDING KEN LAY OF THE ENRON COLLAPSE FROM HOUSTON TEXAS, THE CONVICTION OF KEN LAY AND THE DEATH OF KEN LAY, AND AGAIN VICE PRESIDENT DICK CHENEY..

PLEASE READ THIS COMPLAINT IN ITS ENTIRERTY.

THIS IS A HUGE MIS-CARRAIGE OF JUSTICE, AND WILL CONTINUE TO BE SO, UNTIL SOMETHING IS DONE ABOUT IT...

I HAVE PICKED A FEW SENATORS AND CONGRESSMAN TO READ THIS COMPLAINT..  
IT IS UP TO YOU, WHO ELSE YOU PASS THIS COMPLAINT ONTO...

THE AMERICAN BALD EAGLE  
THE SYMBOL OF AMERICA DOES NOT FLY ANYMORE...  
JUSTICE DOES NOT PERVAIL

THANK YOU FOR YOUR TIME..

SINCERELY

MICHAEL FOX

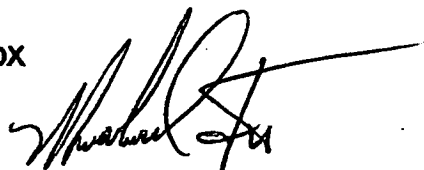


Exhibit 16

Michael Fox

P.O. Box 111621

Naples Florida 34108

Ph. # 239-731 5367

February 4, 2004

To Whom This Concerns

I AM Writing this letter with the Attached Papers That I HAVE Filed in Three Different Cases, One in Lee County Florida, and Two in Collier County Florida.

Attached Also is A Description of the Events that LEAD up to MY Traffic Citations And Arrests.

Following these Pending Cases, IS A Brief History of Abuse that I HAVE Been under By the Government and The Police That Are unlawfully investigating me.

FOR OVER 20 YEARS I HAVE Been under investigation BY The Police Agencies. And Attacked By Them.

I Ask you to Read my Description of Events. And Look At the PAPERS I HAVE Filed in Court on these Three CASES. And See The Abuse By the Police.

Then Read The Description of Some of the Events that I HAVE GONE Through in my life, Because of the Government And the Police. What I HAVE written only Scratches The Surface of Abuse, that I HAVE lived through. And I CAN NEVER Get legal counsel, To Represent me Correctly, Because The Government ALWAYS Gets to every Attorney I have Ever hired. Every Phone I use is Traced OR HAS wire Taps ON It. And MY Vehicle HAS Electronic Tracking Devices ON It.

Michael Fox

P.O. Box 111621

Phone NO. 239 731 5367

Naples Florida 34108

The Case that I have in Lee County Florida. IS  
To Go to TRIAL Tues, Feb, 10 2004

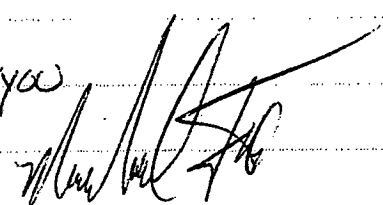
I Hope you can Read About the Two cases I  
Have Brought you.

upon you Accepting these two cases. If you can Get  
The Trial in Lee County Adjourned. So we can prepare  
For TRIAL. A Plea Bargain is unexceptable. The Police  
Always Lie And write false Police Reports when it comes  
To me (Michael Fox)

My Case in Collier County is scheduled For TRIAL  
830 <sup>AM</sup> february 27 2004

Both of these cases in collier county and  
Lee County is total Police Misconduct, Police Abuse,  
I will never Plea Bargain Regarding These CASES

Please Read on

Thank you  




Page  
1 of 9

## Description of Events LEE County

I Am currently working At R. J VANN Mechanical  
I Get up at 4:45<sup>AM</sup> Every morning Mon-Fri And Begin  
work At 6<sup>AM</sup> At the shop Located at 2970 Cargo Ft Myers  
Florida.

I Am Renting A Room From Scott Campbell And Am  
Living At 3726 Whidbeyway Naples Florida.

ON Friday Sept 26 2003 I go to work and come Home.

Later That evening I Drive to Labelle Florida, To Get the  
CALUSA Bell News Paper, Then I Drive to Boca Grande Florida to  
get there Two Local newspapers. This is the 4<sup>th</sup> Time that  
I Have Done This, And in the Same Sequence.

As I Leave Labelle Florida On my way TO Boca Grande  
Florida I Am Heading North on I-75, And I Exit on To  
Toledo Blade, And I Am Heading West. It is Approx. 1230<sup>AM</sup>  
in the morning. As I Am Heading WEST ON Toledo BLADE, I  
Am Approaching The intersection of Price BLVD. Where There is A  
Traffic Light. I HAVE A Green Light And HAVE the Cruise  
control set At 52 mph. There Are NO vehicles At this  
intersection on PRICE BLVD. Where There light is Red. It  
is Pitch Black outside. And there Are NO Lights Shining From  
This Road Intersection, That there Are Any Cars present. As I Get  
Right on top of this intersection ALL of A sudden HEAD Lights  
Are Turned on, And A Police CAR Comes Shooting out At A  
High Rate of Speed, And Then Slams on Its Brakes to stop  
FOR The Red light. As this Police CAR Does This. MY  
Traffic Signal Turned yellow. I WAS completely startled.  
I Floored my GAS Pedal To Get through This Light

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So the light is not Red when I Go through it. This Happened so Fast! This Police CAR, After I went Through the light Continued North on Price Blvd. I Believe That this WAS A staged incident By the Police that Are investigating me. I Continue on to Boca Grande And Get The 2 Local News Papers. And I Drive Around A Little. I Then Leave Boca Grande, And Start Driving Home, I Am Going Back the same way I came. As I Am Driving Down County Rd 771 Its About 1:45<sup>Am</sup> Saturday Morning. Then All of A sudden, from A side Street Head Lights Are Turned on And A White small sub compact CAR comes flying out, At A High Rate of speed And slams on the Brakes, To Avoid From coming out onto my Road. As I Drive By, This man, Has his Head Hanging out of the Drivers Door window And is Looking At me, Like He wants To kill me. He's looking Real Tough And Mean. This vehical Gets Behind me After I Drive By. It Follows me To County Road 776, I Head East, And This CAR Following me Turns West. I said To mySelf yea the Police Are Hot on my ASS Again. I Continue ON. I Am now Back on I-75 Heading South, I Am now south of Fort Meyers Florida on I-75. Three Different vehicals Pass me At A High Rate of speed. After they Pass me, ALL Three Vehicals slow Down. I HAVE my Cruise Control set AT 69 miles Per Hour. As these Three vehicals slow Down, They Are in Both Lanes of I-75 Southbound I Am in the Right Lane And I start coming up Behind one of these 3 vehicals. This vehical then slams on its BRAKES for No Reason. Then The other Two vehicals slam on there BRAKES. And start Changing Lanes. BACK And Forth. And

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BACK in forth Changing Lanes For no Reason. This vehicle That was in front of me that slammed on its Brakes, Then Took off At A High Rate of Speed. And one of the other Two CARS That where Constantly Changing Lanes, Then got in front of me. And Again, This vehicle that is in front of me, slams on ITS BRAKES. IT starts ALL over Again. I Then Slamed on my BRAKES, To A 20 mile per hour Roll on I-75, To Allow These 3 vehicles To Get Away From me. As I Continue Down I-75, Two of these vehicles Are About  $\frac{1}{4}$  of A mile Ahead of me. The 3rd vehicle keeps slowing Down To Get closer to me. This continues Like This for About 3 miles. Then I CAN see A Police CAR HAS HIS FLASHERS ON. on The Right Hand side of I-75 in the Shoulder of the Road. I HAVE my Cruise Control set At 65 mph and I AM in the Right Lane. As I AM Approaching this Police CAR with ITS FLASHERS ON, I Merge From the Right Lane To the left Lane. I Drive By this Police CAR, And notice IT HAS A white Pick up Truck Pulled over. I Then merge BACK into the Right Lane. As I continue Down I-75 After Passing this Police CAR. I HAVE A vehicle Turn ITS Head Lights on And IS in the Left Lane And Then Turns A High SPOT Light on me. I SAY To myself, what The yell IS this. This vehicle is in the left Lane And I AM in the Right Lane And I HAVE A spot Light Being FLASHed on me. I continued For About  $\frac{1}{4}$  of A mile. Then I Touched my Brake Pedal Just to take my mini vann off Cruise control. This vehicle That has ITS Bright Flood Light on me, slams on his BRAKES And Gets Behind me And Turns ITS FLASHERS

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on, For me to Pull over, I Pull over, And I Put my Drivers Door window Down and Put Both my Hands on the steering wheel in the 10-2 Position. I know I Am Being set up. And I Do not know what To Expect, The Police officer comes To my Door And starts Asking me IF I Have A Florida License I Look At him puzzled. This officer Keeps Asking me IF I Have A Florida License. Then He Asks me, IF I Have Ever Applied For A Florida License.

It is Approx 245 AM SAT morning. I have Been up for Almost 24 Hours. I Am very puzzled And confused.

I Ask this Police officer What Are you Talking About. I Have Michigan Plates on this CAR And I Have A Michigan License.

I Am confused And Tired. This Police officer Again Asking me IF I HAVE EVER Applied For A Florida License. I Told This MAN, NEVER. This officer says you have never Applied For A

Florida License. I said no Again. I Am getting pissed. I Ask this Police officer What He Pulled me over for. He would not Answer. I Again Asked Him what you pulled me over for. This

Police officer tells me That I Blue my Horn At him when I Drove By. I Told This Police officer He IS A DAM Lier.

This Police officer looks Away As IN Guilt. The officer Then WANTS my License, Registration, And Proof of Insurance. I ALWAYS CARRY my License on Person. I give It to the officer. I Then Tell the officer That My WALLET is in the Compartment under the PASSANGER SEAT Locked. This Police officer Looks Frightened He GRABS his Gun And his Flash light and Turns it on. He tells me To Get my WALLET. I Get the key out of the Ignition and This Police officer IS Shaking. And Pulling his Gun. I



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Think to myself, This is Where the Police Are Finally G To Kill me. They Are Going to Stage Another Plot. I Bend over un lock the Compartment, And Pull the Draw out And I Lean Back up Right And Point To my wallet. This Police officer is shaking with his Gun Half Pulled and The Flash Light Shining into the Storage compartment. He Tells me To Get my wallet. I Do. I Give him my Registration And Proof of insurance. This officer tells me to sit. I Am Going to Run you on the computer I'll Be Right Back. I SAY TO myself, I Am Going to Jail. I Have un PAID Traffic Tickets That I Did not Pay, And A 1500<sup>00</sup> Bench Warrant for NOT Appearing in Court for Drunk Driving From MARCH of 1996.

The Police officer Comes Back And tells me to get out of the CAR And To STAND Behind my vehical and in front of his. I know he is Doing this Because They Have A CAMERA on me with SOUND. This Police officer Getting Loud At times Asking me what I Have Been Arrested for in the Past. This officer tells me I Am under Arrest And I Am Going to JAIL. This officer tells me to Turn Around and Put my hands Behind my Back. This officer Has his hand on his gun Acting AS IF He is Going to Pull it. I Turn Around with my Hands Behind my Back. And I tell him. I Am NOT Going To Fight you. I Am HAND Cuffed And Put in the Police CAR. This Police officer Then Goes Through my vehical Looking FOR something. I watch everythin this officer is Doing. AFTER This Police officer Gives up looking. He looks frustrated And Disappointed That He Did not Find Anything. The Police officer Gets into the CAR. This Police officer Writes the Police Report Right there ON HIS Computer. I Am Then TRANported to the

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## Lee County Jail.

NOW, EVER SINCE I TOOK THIS RIDE ON FRIDAY, SEPT 2003 THE POLICE CAR INCIDENT THAT HAPPENED ON TOLEDO BLADE AND PRICE BLVD. THEN WHEN I LEAVE BOCA GRANDE AND I AM HEADING HOME ON COUNTY RD 771 AND A SMALL WHITE CAR FLASHES ITS LIGHTS ON AND COMES FLYING OUT, AND SLAMS ON ITS BRAKES. AS IF THIS CAR IS GOING TO RAM ME. THEN AS I CONTINUE HOME ON I-75 I AM AGAIN ATTACKED BY 3 DIFFERENT VEHICLES. DRIVING PAST ME, THEN PULLING IN FRONT OF ME AND SLAMMING ON THERE BRAKES. TRYING TO FURTHER PROVOKE AND INTIMIDATE ME. THEN I BLOW MY HORN AT A POLICE OFFICER ON I-75 - AT 245 AM SATURDAY MORNING. YEA RIGHT. I KNOW THAT THERE ARE UNPAID TRAFFIC TICKETS AND A 1500<sup>00</sup> BENCH WARRANT FOR MY ARREST.

THIS WAS A FULLY DESIGNED AND ORCHASTED PLOTT AGAINST ME. TO GET MY BLOOD PRESSURE FLOWING AND TO ATTACK THEM. I BELIEVE THAT THESE 3 VEHICLES THAT PASSED ME HEADING SOUTH ON I-75 SLAMMING ON THERE BRAKES. TO FURTHER TRY TO PISS ME OFF, AND ATTACK THEM, AND CHASE THEM DOWN I-75

THAT THE POLICE WERE ALREADY STATIONED ON I-75 WAITING FOR ME TO DRIVE BY IN A RAGE, CHASING THESE VEHICLES THAT ARE TRYING TO PROVOKE AND INTIMIDATE ME. AND BECAUSE I DID NOT TAKE THERE BAIT. I AM PULLED OVER BY THE POLICE. THEN TOLD THAT I BLEW MY HORN AT HIM, AS I DROVE BY. THEN THIS POLICE OFFICER TELLS ME TO GET OUT OF MY CAR AND STAND BEHIND MY CAR AND IN FRONT OF HIS SO THAT HE CAN HAVE ME ON CAMERA AND ON SOUND. TO SEE IF I WOULD RESIST ARREST AND FIGHT HIM. AND THIS OFFICER TO HAVE JUST CAUSE TO SHOOT ME. I ALSO SAY THIS. WHEN I



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WAS pulled over. Because I ALLEGEDLY Blue my horn At this Police officer. How come this officer never Approached me AS IF I WAS Drunk or High on Dope. This officer never Looked At me IN that manner, OR Asked me To Do A Field Sobriety TEST. I WAS never Asked IF I had Been Drinking OR ON Drugs of Any kind. And At 245 AM Saturday Morning. This Police officer WAS JUST Part of Another Plot to further Provoke me. Intimidate me And to TRY to Get me To lash Back, And to Charge me with OTHER Crimes Like Assault with A motor vehicle. Attempted Murder. OR MAYBE they would kill me with A CAMERA ON TO JUSTIFY There Actions.

I am currently on light Duty work Because of A Workers Comp Accident. As I am in A large Holding Cell in Lee County Jail. This MAN STARTS TALKING To me casually. Then This MAN goes in And starts talking About Workers Comp. And that he WAS injured on the Job. This man continued And He WAS Trying to get me to talk. I Played the Game And told him How workers comp has Treated me with MY Knee Replacement. I WAS getting Paid 431.<sup>00</sup> Per week on workers comp. This MAN Proceeds to tell me I will never Get Another check Because what I Am Getting is to much. I KNOW This WAS undercover Police, And I Believe He WAS From Michigan.

AFTER I had this conversation with This man, He Bonded out. When He said He Did not have the money to Bond out.

I Spent Two Days in Jail Before I could get Bond Posted.

I Do NOT Have The Date Right now But It WAS

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Saturday or Sunday, I AM WATCHING Cable Station. I see A Advertisement For Computers ON SALE This weekend only At the Lee County Civic Center. There IS A Retail show going on. I AM Looking to Purchase A computer. I Leave And Drive to this show, I AM Being followed into the Parking Lot and into the show, And when I Leave the show, I AGAIN Get on I-75 To Head South For 30 miles. As I AM Driving, I AM in The Right Lane with the Cruise control ON. ALL of A Sudden, one, Right After Another, vehicals ARE passing me. ALL With Michigan License Plates. These vehicals would Then merge into my Lane, Then AFTER A while of Driving They would slam ON There BRAKES For no Reason. Then This vehical would take off And another vehical with Michigan Plates would Pull in Front of me. And AGAIN slam ON the BRAKES. As this was going on more and more vehicals ARE Passing me in the Left Lane. Almost Every Vehical HAS Michigan Plates ON It. This Provoking and intimidation went ON FOR AT LEAST TEN MINUTES. I AGAIN would slam ON my BRAKES and let these vehicals Get AHEAD of me. But I COULD NOT. These vehicals with Michigan Plates JUST keep coming And Passing ME, Then Pulling into my Lane, And Then slamming ON There BRAKES. While Other vehicals with Michigan Plates ARE going From Left Lane to Right Lane, Then Right Lane to Left Lane. I said to myself not this Again. I AM Really Getting Pissed off. Now AS I AM Driving Down I-75 in the Right Lane Waiting in the middle median Between The South bound and North Bound LANES IS A Florida STATE Trooper sitting in his Chevy Suburban He is pointed out Towards the south bound Lane. Perpendicular to I-75 South bound. He HAS his Passenger window DOWN. And is

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STARRING Right At me As I Am Approaching Him This officer is looking Real Mean and Tough at me. I Am in the Right Lane with Cruise Control On. I Am looking Right Back at this Police officer with the same look. I Am Really Pissed off Right now. I Drive by The state Police vehicle, starring this state Trooper Down turning my head to Look at this man, As I Drive By. This state Trooper starring Back, He looked Away, As He could see How pissed off I was. This state Trooper looking Guilty As Hell. This state Trooper new that I knew why He was sitting there. Again this was Another Police Government Agency. Trying to intimidatate and Provoke me. Trying To Get me To STRIKE Back with some kind of violence. And I will Be Charged with more Crimes. The Police will never Leave me Alone. I Believe This is Michigan state and Florida state Police Attack Its Like they Have Told me IN the state of Michigan. That I HAVE To grow my hair long, Put it in A Pony Tail, AND work AS A Michigan State Police INFORMANT FOR the Crimes I have Committed. And IF I Dont work AS An informant my life will Be Really HARD. And I mean Really HARD. And It Does not MATTER where you go. The Police will follow you.

This incident Leaving the Lee County Civic Center And Driving Down I-75 South Bound Happened the 1<sup>st</sup> weekend OR 2<sup>nd</sup> weekend AFTER I Bonded out of the Lee County Jail.

The following is PAPERS I Have filed in Lee County Court ON this CASE.

Then the PAPERS following That Are The Distinction of EVENTS of my Arrest in Collier County.